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SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES

FRED COMMUNITY ADVISORY BOARD
FRED COMMUNITY ADVISORY COMMITTEE

MINUTES

1990 – 1991

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CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY BOARD

Minutes of the May 23, 1990 Meeting

The first meeting of the FRED Community Advisory Committee was held on Wednesday, May 23, 1990 at 10 a.m., at 170 Otis Street in the 8th Floor Conference Room.

PRESENT
Julia I. Lopez, General Manager, Department of Social Services
Claude E. Finn, Deputy General Manager, DSS
John R. Vera, Assistant General Manager, DSS, Chair
Carla Javits, Executive Assistant to the General Manager
Michael Hancock, Coordinator FRED Program,
Juan Galvan, Senior Supervisor, FRED Program
Ray Colmenar, Executive Staff DSS
Barbara Nabors-Glass, Income Rights Advocates
Rita Semel, United Way Subcommittee on Homelessness
Judith A. Blochourak, General Assistance Advocacy Project
Virginia G. Leyua, SF Neighborhood Legal Assistance
John Greer, Hamily Family Shelter
Josh Brandon, Coalition on Homelessness & Homeless Task Force
Rose Smith
Louise Rainey, Secretary, Social Services Commission

WELCOME AND GENERAL MANAGER'S STATEMENT

General Manager Julia I. Lopez welcomed the assembly and expressed the hope that the proceedings would result in a substantive discussion of FRED procedures and implementation issues in order to assist the department to implement the program in a positive, productive and efficient manner respectful of people's rights.

Ms. Lopez introduced Assistant General Manager John R. Vera as the chair of today's meeting.

FRED POLICY CHANGES

Mr. Vera noted the changes to FRED policies that the Commission made at its April 26th meeting:

1. Unannounced visits are to be discontinued and prohibited;
2. Lack of an eviction notice, are not to be used as a basis for referral when a recipient reports that she/he has been battered by another member of the household;
3. Referrals are not to be made based on suspicion that income is being earned by a General Assistance recipient, pending enactment of the Income Disregard Program;
4. A review process is to be undertaken with community groups to re-evaluate operating procedures and referral criteria, and that the administration report back to the Commission in one month.

Further, Mr. Vera noted that a new service component has been added to the FRED unit to better assist clients in need of additional services.

DISCUSSION Josh Brandon stated the community asks that the FRED program be suspended while changes are made to develop a program that respects the client's rights. Mr. Brandon stated further, that the present FRED program has two serious flaws: it is not cost effective and brings undue hardship to clients.

CONCLUSIONS No consensus was reached by the Committee.

Community members of the committee took the position that the FRED program be suspended for three months during which time the committee would do all in its power to work with DSS towards the development of a more humane program. At the end of the three month period, the committee would present its recommendations, and work with the department for the implementation of a more humane FRED program.

In accordance with the Commission's motion of 4/26, would like to continue the operation of the FRED program while working together with the committee in refining the FRED procedures.

Rita Semel suggested a compromise position: a three month period wherein the committee and DSS staff would work together while the program continues in operation, followed by a re-evaluation of the program at the conclusion of the three month period.

NEXT MEETING By general consent, the committee agreed to meet again on Tuesday, May 29th at 10 a.m., 170 Otis Street, 8th Floor Conference Room.

CONTACT DSS contact person for the committee: Raymond Colmenar, 557-6525.

ADJOURN There being no further business, John Vera adjourned the meeting at 12:15 p.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY BOARD

Minutes of the June 6, 1990 Meeting

The third meeting of the FRED Community Advisory Committee was held on Wednesday, June 6, 1990 at 10 a.m., at 170 Otis Street in the 8th Floor Conference Room.

PRESENT

Commissioner Marilyn Chow, President, Social Services Commission
John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator FRED Program
Raymond Colmenar, Policy Analyst, DSS
Julia C. Velson, Homeless Advocacy Project
Virginia C. Leyva, San Francisco Neighborhood Legal Assistance
Bill Hirsch, Tenderloin Self Help Center
Barbara Arms, Coalition of Homeless Women and Children
Sandy Weiner, Income Rights Project
Mildred Spivey, Income Rights Project
Judy Blochowiak, General Assistance Advocacy Project
Robert Capistrano, San Francisco Neighborhood Legal Assistance
Jonathan Greer, Hamilton Family Center
Rose Smith, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

FRED COMMUNITY ADVISORY BOARD REQUESTS

The FRED Community Advisory Board asked the Department of Social Services to furnish the following to enable them to fulfill thier role:

- provide the required statistics in a timely way
- provide its representatives with decision making power
- ensure a member of the Advisory Board is present when Board recommendations are presented and discussed with the general manager
- arrange a meeting between the general manager and the Advisory Board before the next Social Services Commission meeting
- provide Advisory Board with written responses and the rationale behind those responses
- ensure that action is taken to address the concerns of the Advisory Board
- arrange for a member of the Social Services Commission and a legislative aide of the Board of Supervisors to sit on the Advisory Board

Discussion followed as to the Community Advisory Board's role.

COMMISSION REQUEST

Commissioner Chow stated that the Commission's motion asked for their input to make the FRED program more humane. Commission Chow asked that the Board gather information, determine consensus if possible and come to the Commission with clear action items.

John Vera assured the department would comply with the requests of the FRED Community Advisory Board and will seek Ms. Lopez's response to items 3 & 4.

Michael Hancock asked that complaints re the FRED program be directed to his attention. Mr. Hancock's beeper number is 399-2026.

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INDEPENDENT AUDIT — Sandy Weiner suggested that an independent audit of the FRED statistic for
1. a clear cost benefit analysis
2. human costs

The department will explore resources to enable such an audit.

CONFIDENTIALITY — Jon Greer stated the question of confidentiality must be dealt with. It is clear clients want us to have this information and a way must be found to offer them the opportunity to make this information available to the Advisory Board.

NEXT MEETING — By general consent it was agreed to next meet on Wednesday, June 13, 1990 at 9 a.m. at 170 Otis, 8th Floor Conference Room.

NEXT AGENDA
1. FRED Process - a walk through of the mechanics
2. Discussion of FRED referral criteria

FUTURE AGENDA TOPICS — At future meetings, the complaint procedure and concerns of special populations will be discussed.

DSS CONTACT — Raymond Colmenar 557-6525 was designated as the DSS Contact person for the FRED Community Advisory Board. Direct agenda material to Raymond.

COMMUNITY CONTACT — The Advisory Board will deliberate and designate their contact person. That name will be reported at the next meeting.

ADJOURN — There being no further business, the meeting was adjourned at 11:15 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

DRAFT

FOR YOUR REVIEW

RM

CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P.O. Box 7988, San Francisco, CA 94120

A meeting of the FRED Community Advisory Committee was held on Tuesday, May 29, 1990 at 11:30 a.m., at 170 Otis Street in the 8th floor conference room.

Present: John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator FRED Program, DSS
Juan Galvan, Senior Supervisor FRED Program, DSS
Ray Colmenar, Executive Staff, DSS
Julia Velson, Bay Area Bar Association
Rita Semel, United Way, Subcommittee on Homelessness
John Greer, Hamilton Family Center
Josh Brandon, Coalition on Homelessness & Homeless Task Force
Claudia Maduro, Secretary to John Vera

Assistant General Manager, John Vera noted that last week's Community Board recommendations had been discussed with Julia Lopez, General Manager, and that FRED operations will not be suspended, but that DSS will continue to work with the Board towards a more humane FRED program and be open to recommendations from the Community Advisory Board.

Community Board members would like to have a case by case audit of the FRED program to find out whether it is cost effective or not.

hn Greer noted that Juan Galvan had given them a breakdown of FRED statistics and that it seemed that FRED was more intimidating to clients than that it was a cost effective program.

Josh Brandon noted that the Coalition on Homelessness would be discussing their analysis of the cost effectiveness of the FRED program during the Social Services Commission meeting on Thursday, May 31.

Community Board members asked what the waiting period was for reapplyin for aid. John Vera replied that there was no waiting period for AFDC and that GA clients had to wait 2 weeks before reapplying.

By general consent, the committee agreed to meet again on Tuesday, June 6, at 10 a.m., 170 Otis, 8th Floor Conference Room.

DSS contact person for the committee: Raymond Colmenar, 557-6541.

There being no further business, John Vera adjourned the meeting at 12:30 p.m.

CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY BOARD

Minutes of the June 13, 1990 Meeting

The fourth meeting of the FRED Community Advisory Committee was held on Wednesday, June 13, 1990 at 9:30 a.m., at 170 Otis Street in the 8th Floor Conference Room.

PRESENT

Commissioner Marilyn Chow, President, Social Services Commission
John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator FRED Program
Juan Galvan,Senior Supervisor, FRED Program
Josh Brandon, Coalition on Homelessness
Rita Semel, United Way Subcommittee on Homelessness
Bill Hirsh, Tenderloin Self Help Center
Judy Blochowiak, General Assistance Advocacy Project
Virginia Leyva, San Francisco Neighborhood Legal Assistance
Julia C. Velson, Homeless Advocacy Project
Jonathan Greer, Hamilton Family Center
Sandy Weiner, Income Rights Project
Rose Smith, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

DEPARTMENT REPORT

John Vera reported that General Manager Lopez has agreed to meet with the FRED Community Advisory Group before the next Commission meeting, and is willing to listen to suggestions re an independent evaluation of the cost benefit/human benefit of the FRED program, but has diffculty visualizing how the evaluation could be done. Further, Mr. Vera reported that as agreed the material requested by the Advisory Board had been sent.

COST BENEFIT ANALYSIS

Josh Brandon contended that the statistics used to formulate the Department's cost benefit analysis of the FRED Program are deceptive and do not represent what the City is spending or saving. FRED is a controversial program and the community needs the data they are requesting for evaluation of the program.

Sandy Weiner offered assistance to redesign the FRED referral form so as to protect client confidentiality while providing demographic informatio for evaluation. Ms. Weiner stated the community would be willing to also document and tabulate statistics.

Discussion followed.

Sandy Weiner agreed to submit their revisions for the referral form to the department by Monday, June 18th, preparatory to discussion at the Wednesday June 20th meeting.

John Vera assured that Ms. Javits or her representative will be present at the next meeting to review the FRED cost benefit analysis formul and answer the Advisory Board's questions.

PROPOSED FRED REFERRAL PROCEDURES

Ms. Sandy Weiner presented the attached proposed FRED procedures. (SEE ATTACHMENT ONE)

Discussion followed.

John Vera agreed to the proposal with two exceptions: (1) The 1st paragraph "Task Force-Confidentiality-Release of Information; and (2) The proposal for a signed statement and a signed receipt.

Juan Galvan agreed to furnish Ms. Weiner his example of a secondary contact as described in an All County Letter.

NEXT MEETING

By general consent, it was agreed to meet again on Wednesday, June 20th at 9 a.m. in the 8th Floor Conference Room at 170 Otis.

AGENDA

The following topics were calendared for the June 20 Agenda:

1. FRED referral criteria
2. Consequences for eligibility workers not complying with FRED procedures.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

COMMUNITY OVERSIGHT COMMITTEE'S
PROPOSED FRED PROCEDURES
JUNE 13, 1990

Task Force - Confidentiality - Release of Information

All people referred to FRED should be informed of the Task Force--its work and its participants. Clients should be given the opportunity to sign a release for the Task Force and/or be given a list of the participants and their phone numbers so s/he may contact a participant for more information.

Process for Referral

1) EW determines whether the client meets the referral criteria.

2) If so, the EW should explain to the client what information would be necessary to clarify any inconsistencies or questions. According to the regulations the client should be the primary source of information EAS 40-107 Food Stamp MPP 63-300-544; G.A. Regulatons 91-5(2) and 91-1(1). If the EW needs more information the client should be provided an opportunity to provide it before the necessity of a FRED referral can be determined.

3) The EW should be clear exactly what type of verification is needed and why, and provide assistance in obtaining this verification if the client asks for help. EAS 40-157

4) If the EW still feels that the client should be referred, s/he must document the following:

- What information is suspicious or incomplete and why? (Mere suspicion is not sufficient).

- What attempts did EW make to verify information and the results of those attempts.

- A signed statement in the client's primary language that the client is aware that his/her case will be investigated, why it is being investigated and his/her rights under the investigation. These shall include:

  a) Home visits should be scheduled 3 days in advance with an opportunity to reschedule.
  b) No one has the right to search their clothing or other personal belongings.

c) No third party should be contacted without the client's written consent specifying who will be contacted, why that person will be contacted, and what information can be asked. If the client wants to get this information, s/he must be first given this opportunity. EAS 40-107, 40-157, MPP 63-300.544

d) No third parties will be informed that the client is applying for public benefits absent the client's consent. Amendment I, California Constitution.

e) The client's right to an authorized representative during all aspects of the FRED investigation as well as throughout the application process. A list of all the advocacy organizations should be provided.

f) Aid can not be delayed pending the investigation. The client shall be informed of all the applicable deadlines for denying or granting aid.

5) A signed receipt from the client that s/he was given a copy of the complaint form should also be kept in the file. A clear explanation of where the complaint should be sent and how it will be acted upon should be spelled out on the complaint form. Clients should also be given a list of all advocacy groups which s/he may contact. Again, the complaint form should be available in the client's primary language.

6) UNDER NO CIRCUMSTANCES SHOULD AID BE DELAYED PENDING AN INVESTIGATION.

7) No cases should be referred until the EW's supervisor has reviewed the above documentation and assured that all steps have been taken and the referral is still necessary and appropriate. This shall be noted on the FRED referral sheet and reviewed by the FRED supervisor as well.

FRED Investigation

1) Prior to conducting any investigation, the FRED worker must contact the client and outline what information and sources of information will be investigated and why. EAS 40-157

2) No home visit should occur absent clear documentation that all other attempts to verify information have failed EAS 40-161. All home visits must be approved by the FRED supervisor. Notices must be mailed out three days in advance scheduling the home visit. The notices shall state that the client may re-schedule if the time is not convenient. UNDER NO CIRCUMSTANCES

SHOULD THE CLIENT'S PERSONAL BELONGINGS BE SEARCHED!!!

3) Prior to contacting any third parites, the client must be given an opportunity to obtain any of the necessary information. If still needed, the FRED worker must obtain a signed consent from the client for each person to be contacted outlining the reasons for the contact and what information may be obtained.

FRED Recommendations

1) Under no circumstances should an EW be advised to deny or discontinue aid. The results of the FRED investigations should state the following:

- What information was to be investigated.
- What steps were taken during the investigation by both the client and the FRED worker.
- What information was found during the investigation.

It is then up to the EW and the EW's supervisor to determine what further action should be taken.

EW's Role after Investigation

1) The EW and the EW's supervisor should review the results of the FRED investigation with the client regardless of whether aid will be approved or denied.

2) If the EW feels there are still questions s/he should provide the client with an opportunity to clarify or provide any additional information; and offer assistance in obtaining any additional information. During this discussion, the EW must make it clear how this information affects eligibility so the client may have an equal opportunity in exploring other possible ways to verify the information.

3) Following the clients explanation if the EW still feels it is necessary to deny or discontinue aid, the client shall be given a notice of action and another explanation of the fair hearing process, aid paid pending and the complaint procedure. Once again, the client should be informed of the Task Force and how to reach the participants.

4) The EW should also discuss and explore with the client other categories of eligibility (e.g. AFDC-U; AFDC disability; G.A., etc.)

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CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY BOARD

Minutes of the June 20, 1990 Meeting

The fifth meeting of the FRED Community Advisory Board was held on Wednesday, June 20, 1990 at 9 a.m. at 170 Otis Street, in the 8th Floor Conference Room.

PRESENT

Commissioner Jack Morrison, Member, Social Services Commission
John R. Vera Assistant General Manager, DSS
Carla Javits, Executive Assistant to the General Manager, DSS
Michael Hancock, Coordinator SFDSS FRED Program
Juan Galvan, Senior Supervisor, SFDSS FRED Program
Bill Hirsch, Tenderloin Self Help Clinic
Laura Ware, Hamilton Family Center
Robert Capistrano, SF Neighborhood Legal Assistance
Julia Velson, Homeless Advocacy Project
Virginia Leyva, SF Neighborhood Legal Assistance
Judy Blochowiak, General Assistance Advocacy Project
Jonathan Greer, Hamilton Family Center
Sandy Weiner, Income Rights Project
Josh Brandon, Coalition on Homelessness
Louise Rainey, Secretary, Social Services Commission

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COST BENEFIT ANALYSIS

Carla Javits presented a chart of the FRED fraud prevention costs and benefits based on the department's experience for the months of March/April. and delineated the method employed to arrive at the departments cost benefit figures. (SEE ATTACHMENT ONE)

Josh Brandon spoke of his opposition to the program because of its inability to pay for itself.

Discussion followed.

John Vera affirmed the department continues to collect data on the FRED program during the coming year in order to determine the validity of the program.

DATA COLLECTION FORM AND FRED REFERRAL FORM

John Vera reported the department has implemented changes on FRED forms based on the Advisory Board's recommendations:

1. application packet will include a document specifically outlining a Fraud Prevention Unit and activity;
2. AFDC will issue an all-staff memo outlining staff's responsibility to the client who has been referred;
3. referral form will be made a four-part document so that client receives a copy and the back of that form will address client rights including their right to complain.

Further, Mr. Vera stated that the draft forms will be presented to the Advisory Board for their input.

Mr. Vera agreed that posters regarding the existence of the Task Force could be posted in the department.

Upon the request of Jonathan Greer, the department agreed to provide criteria established with the State for the funding of FRED activities.

The Task Force submitted documents for the department to review regarding data collection.

ONFIDENTIALITY — Ms. Lopez will attend the Advisory Board's June 27th meeting and address the Advisory Board's recommendation re confidentiality and an independent study of the FRED program.

REVIEW OF FRED REFERRAL CRITERIA — Laura Ware stated the referral criteria applied to AFDC Homeless should be individualized for each case, should emphasize present needs, and should involve the client in the process.

Additional discussion resulted in the elimination of Criteria #3 under AFDC Homeless.

Recommendations were made regarding identifying a time period in Criteria #1, and eliminating the word "relative" in Criteria #2. No action was taken.

NEXT AGENDA

1. FRED Referral Criteria
2. Consideration of the draft SF Foundation Grant proposal
3. Consideration of the Advisory Board's report to the Social Services Commission
4. State of California FRED Plan

NEXT MEETING — Wednesday, June 27th at 9 a.m.

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

FRAUD PREVENTION COSTS AND BENEFITS

	AFDC	SAVINGS AFDC Homeless	GA	TOTAL SAVINGS	Costs	Net
Two Months	$30.008	$93,120	$682	$123.810	$63.888	$59.923
Federal	$15,004	$46.560		$61.564	$31.944	$29.620
State	$13,504	$41.904		$55.408	$15.972	$39.436
Local	$1.500	$4,656	$682	$6.838	~~$7,986~~	(~~$1,148~~)
					15,972	9,134
One Year	$694.276	$535,440	$20,460	$1,250.176	$383.325	$866.851
Federal	$347.138	$267,720		$614.858	$191.663	$423.196
State	$312,424	$240,948		$553,372	$95,831	$457,541
Local	$34,714	$26.772	$20.460	$81.946	$95.831	($13,885)
Casemonths*						
Two Months	44	48	2			
One Year	1018*	276*	60			
Grant Amt.	682	1940	341			

*Assumes 5 percent of those discontinued or denied reapply successfully for aid-based on experience to date

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CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY BOARD

Minutes of the June 27, 1990 Meeting

The sixth meeting of the FRED Community Advisory Board was held on Wednesday, June 27, 1990 at 9 a.m. at 170 Otis Street, in the 8th Floor Conference Room.

PRESENT

Julia I. Lopez, General Manager, Department of Social Services
John R. Vera, Assistant General Manager, DSS
Carl Javits, Executive Assistant to the General Manager, DSS
Raymond Colmenar, Policy Analyst, DSS
Michael Hancock, Coordinator - DSS FRED Program
Juan Galvan, Senior Supervisor, DSS FRED Program
Laura Ware, Hamilton Family Shelter
Robert Capistrano, SF Neighborhood Legal Assistance
Julia Velseon, Homeless Advocacy Project
Judy Blochowiak, General Assistance Advocacy Project
Jonathan Greer, Hamilton Family Shelter
Sandy Weiner, Income Rights Project
Josh Brandon, Coalition on Homelessness
Louise Rainey, Secretary, Social Services Commission

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STATE BUDGET

Julia Lopez briefly described the drastic cuts to the State Budget proposed by the Governor. Ms. Lopez stated the importance of working together in opposition to the proposed cuts and urged that the leadership, especially the Gubernatorial candidates, be made aware of the dire impact these cuts would have on the delivery of social services to the poor.

Discussion followed and it was agreed to share information and pool resources in an effort to get to the Republican Caucus in both houses.

INDEPENDENT EVALUATION

Jon Greer asked Ms. Lopez if she would agree to an independent outsider looking at the FRED Program. Mr. Greer has explored funding for this proposal with the San Francisco Foundation and an independent researcher.

Ms. Lopez stated that she agree in principle with the proposal for an independent evaluation of FRED, but it hinges on a question of funding and consensus on the research design. Discussions continue.

ONFIDENTIALITY

Ms. Lopez reported that there are specific rules which are applied to protect client confidentiality in program evaluations. The department can explore how these rules can be applied in an evaluation of the FRED Program.

DRAFT COMMISSION REPORT

John Vera presented a draft of the report he will present at the 6/28 Commission meeting.

Sandy Wiener asked that non-english speaking clients not be referred to FRED until information/forms are translated into their primary language.

John Vera accepted Ms. Weiner recommendation. Documents involved: referral form, cover document, and complaint form.

DATA COLLECTION — Michael Hancock reported that work continues on the requested collection of data. It has been a slow, tedious process, but it is nearly on line.

COST BENEFIT ANALYSIS — Carla Javits presented and explained her chart delineating the estimated fraud prevention costs and benefits based on the first three months of actual experience. (SEE ATTACHMENT ONE)

THIRD PARTY CONTACT — Sandy Weiner contends that signed written consent must be obtained from clients prior to contacting a third party.

Discussion revealed that although the State have given verbal permission to contact third parties without signed written consent, the department did not have this approval in written form.

John Vera stated the department will pose the question in writing to the State and will request a decision from them.

REFERRAL CRITERIA — After consideration, AFDC-Homeless Criteria No. 4 - Page 6 was deleted by general consent.

After consideration, AFDC-Homeless Criteria No. 5 - Page 6 will be modified by the department in an attempt to make it clearer in its intent, and then brought back to the Advisory Board July 11th for their further consideration.

NEXT MEETING — By general consent, it was agreed to meet again on Wednesday, July 11th at 9 a.m., at 170 Otis - 8th Floor Conference Room.

AGENDA — 1. Review of FRED's Criteria for Referral

AGENDA — John Vera adjourned the meeting at 11:15 a.m.

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

TABLE I
ESTIMATED FRAUD PREVENTION COSTS AND BENEFITS
BASED ON FIRST THREE MONTHS OF ACTUAL EXPERIENCE

	SAVINGS				TOTAL		NET
	AFDC	AFDC Homeless	GA	FS	SAVINGS	Costs	SAVINGS
hree Months	$40,238	$69,362	$2,387	$340	$112,327	$95,831	$16,496
Federal	$20,119	$34,681		$340	$55,140	$47,916	$7,224
State	$18,107	$31,213			$49,320	$23,958	$25,362
Local	$2,012	$3,468	$2,387		$7,867	$23,958	($16,091)
ne Year	$694,276	$264,433	$57,629	$10,965	$1,027,303	$383,325	$643,978
Federal	$347,138	$132,217		$10,965	$490,320	$191,663	$298,657
State	$312,424	$118,995			$431,419	$95,831	$335,588
Local**	$34,714	$13,222	$57,629		$105,564	$95,831	$9,733

asemonths*

Three Months	59	72	7	4
ne Year	1013	276	169	129
ant Amt.	682	630	341	85
		1,091		

ssumes 5 percent of those discontinued or denied reapply
successfully for aid based on experience to date

ATTACHMENT ONE

TABLE I
ESTIMATED FRAUD PREVENTION COSTS AND BENEFITS
BASED ON FIRST THREE MONTHS OF ACTUAL EXPERIENCE

	SAVINGS				TOTAL		NET
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Federal	$20,119	$34,681		$340	$55,140	$47,916	$7,224
State	$18,107	$31,213			$49,320	$23,958	$25,362
Local	$2,012	$3,468	$2,387		$7,867	$23,958	($16,091)
ne Year	$694,276	$264,433	$57,629	$10,965	$1,027,303	$383,325	$643,978
Federal	$347,138	$132,217		$10,965	$490,320	$191,663	$298,657
State	$312,424	$118,995			$431,419	$95,831	$335,588
Local**	$34,714	$13,222	$57,629		$105,564	$95,831	$9,733

asemonths*

Three Months	59	72	7	4
One Year	1018	276	169	129
rant Amt.	682	630	341	85
		1,091		

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successfully for aid based on experience to date

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FRED COMMUNITY ADVISORY COMMITTEE

Minutes of the July 11, 1990 Meeting

-90

The seventh meeting of the FRED Community Advisory Committee was held on Wednesday, July 11, 1990 at 9 a.m. at 170 Otis Street in the 8th Floor Conference Room.

PRESENT

John R. Vera, Assistant General Manager, DSS
Raymond Colmenar, Policy Analyst, DSS
Tangerine Brigham, Policy Analyst, DSS
Michael Hancock, Coordinator - DSS FRED Program
Ylonda Calloway, Eligibility Worker Supervisor - DSS FRED Program
Ana Martinez, Social Worker - DSS FRED Program
Laura Ware, Hamility Family Center
Rita R. Semel, United Way Committee on Homeless
Julia C. Velson, Homeless Advocacy Project
Virginia G. Leyva, SF Neighborhood Legal Assistance Foundation
David Jaffee, Hospitality House
Sandy Weiner, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

INTRODUCTION OF FRED SOCIAL WORKER

Michael Hancock introduced the FRED Program's recently hired Social Worker, Ana Martinez. Michael and Ana encouraged the community to offer suggestions on how the FRED Social Worker position can best serve the client population.

STATE BUDGET

John Vera offered a brief update re the State budget and the affect the anticipated cuts will have on the department's programs. The longer the delay in adopting a budget, the graver the impact will be to the department.

IMPLEMENTATION OF RECOMMENDED PROCEDURAL CHANGES

Mr. Vera noted the FRED procedural change re non-English speaking clients has been implemented. Other procedural changes will be implemented this week and the FRED Community Adivisory Committee (FCAC) will be furnished with copies of the memo of instruction to line EW staff written by Tony Arturi & Liz Strand.

REFERRAL CRITERIA REVIEW

AFDC-Homeless #5: This is the second incident of homelessness on or about the anniversary date within a twenty four (24) month period. By general consent, it was agreed that staff would consider a revision and bring its recommendation to the 7/18 FCAC meeting.

AFDC-Homeless #6: By general consent, the FCAC agreed to additional clarifying language (underlined):

Once Homeless Assistance has been denied, the client alters the story or provides different verification, and Eligibility Worker is unable to verify the new information.

AFDC-Homeless #7: By general consent, the FCAC agreed to delete the criteria.

2nd Criteria Grouping #1: By general consent, the FCAC agreed to additional clarifying language (underlined):

The receipt appears to be altered and the client can not give a satisfactory and/or verifiable explanation for the alteration.

REFERRAL CRITERIA REVIEW - continued

2nd Criteria Grouping #2: By general consent, the FCAC agreed to accept the criteria, with the stipulation that all actions be documented.

2nd Criteria Grouping #3: By general consent, but with reservations indicated by Sandy Weiner, the FCAC agreed to additional clarifying language (underlined):

Client currently receiving Homeless Assistance is unable to give the Eligibility Worker information about the location of the previous week's residence.

2nd Criteria Grouping #4: Staff agreed to consider revising the criteria and will bring its recommendation to the 7/18 FCAC meeting.

NEXT MEETING

By general consent, it was agreed to meet again on Wednesday, July 18th at 9 a.m. in the 8th Floor Conference Room at 170 Otis.

ADJOURN

There being no further business, John Vera adjourned the meeting at 11:15 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

and County of San Francisco

Department of Social Services

Julia I. Lopez
General Manager

Claude E. Finn
Deputy General Manager

Assistant General Managers
Ann O' Rielly
Rose Lou Randolph
John R. Vera

FRAUD DETECTION AND PREVENTION ACTIVITY SUMMARY

JUNE 1990

COMMISSION ACTION

The Social Services Commission at its May 1990 meeting, voted four to one not to suspend the FRED program. The Comission requested that the Department and community groups continue to meet to examine FRED procedures and referral criteria.

FRED ADDS SOCIAL WORKER

Beginning the second week of July, a social worker will be added to the FRED unit to assist clients needing services other than public assistance.

The service worker will assess needs, make referrals, and offer follow-up services to clients.

Referrals will be made to various community and public agencies that provide services such as: health care, counseling, housing, and other resources.

BOARD OF SUPERVISORS DISCUSS FRED

The Finance Committee of the Board of Supervisors, during the Committee's budget hearings, discussed the Department's FRED program.

Members of the Committee requested the Department to provide the Committee with a quarterly report on the program.

FRED COMMUNITY ADVISORY BOARD

The Community Advisory Board has met weekly since May 23rd to examine ways in which the FRED program can better perform eligibility verification.

The focus of the meetings have been on: 1) the role and structure of the advisory board; 2) FRED process; 3) FRED referral criteria; 4) FRED statistics and cost-benefit analysis.

The Commission and the General Manager have agreed to participate in the Advisory Committee process.

The Department is in the process of adopting the Committee's recommendation to modify existing FRED procedures.

In addition, the Department has agreed to furnish the Committee with: statistics on a timely basis, an explanation of its cost-benefit analysis, rationales for its opposition to recommendations, and to share draft materials with the Committee.

Future topics for discussion will include: evaluation of the program, and how to deal with special populations.

FRED STATISTICS

In May, the FRED unit received 103 referrals for eligibility verifications.

* 56 or 54 percent were approved for assistance.

* 24 or 23 percent were denied.

Reasons for denial:
- 8 had not been evicted
- 6 lost contact with client
- 3 had false addresses or fake rental agreements
- 3 failed to cooperate
- 1 client lived with parents
- 1 client was not homeless
- 1 client was in permanent housing
- 1 client had rent exceeding HA limit

* 23 or 22 percent were discontinued.

Reasons for discontinuance:
- 12 whereabouts unknown
- 4 did not have child in the home
- 2 failed to cooperate
- 2 lost contact
- 1 moved out of SF
- 1 has permanent housing
- 1 client was not paying rent

TATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814

March 21, 1990

Mike Hancock, FRED Unit
San Francisco Department of
Social Services
P.O. Box 7988
San Francisco, CA 94103

Dear Mr. Hancock:

Just a note to reiterate some of those items we recently discussed.

The majority of County Fraud Early Detection (FRED) units are composed of investigators. Hence, most if the experience we have is related to these types of units. Sacramento and Monterey also use Eligibility Workers (EW), are similar in size to San Francisco, and may be able to provide some guidance to your operation. I know you have been in contact with Sacramento. The proper contact in Monterey is Debbie Dailey, telephone (408) 755-4400.

As San Francisco utilizes the EW classification, a key point should be brought out in any discussion on FRED: This program grants no new authority to the County, nor adds any extra procedures on the applicant; rather it simply concentrates existing authority in a specialized unit. This activity may be provided by the line intake workers in one County, or by specialized workers in another such as San Francisco has begun. If it appears to some observers that FRED constitutes a new Departmental activity, it only reflects the past inactivity.

On the subject of unannounced home calls, this is an area of some debate. Within some broad guidelines (see regulation 20-007.33 and 40-161 et. seq.). I know of nothing that otherwise prohibits them. They can be very productive; however, I counsel some discretion in their use. The Food Stamp program has some specific requirements of its own, please review Division 63.

As regards third party verification, there are considerable restrictions on their use (without consent). Sections 40-157 and 20-006.5 of the regulations provides some guidance on the subject.

There is a body of opinion that holds that the "authorization to verify" release on the aid application is sufficient for most third party verifications (Financial Institutions require specific consent. See Section 7480 of Government Code). I'm unaware of any court decisions providing clear interpretation on the matter.

An applicant may be denied aid for failing to cooperate in establishing eligibility if they fail to sign a release and that the item is essential to the establishment of eligibility (40-157.23). The denial must be on the lack of cooperation, not on whether or not the agency can make the verification once the release is obtained.

Again the Food Stamp program has some (see attached) specialized requirements.

The statistics for your FRED should be reported on the DPA 266, copy enclosed. An All County Letter on the subject was recently distributed and is also enclosed.

The above comments deal with the AFDC and/or Food Stamp program. General Assistance is of course, a county only program with little State requirements. This seems to be a program run more by court order than by a manual of policy and procedures. Welfare and Institutions Code (WIC) Section 17006 provides some direction but for the most part you will have to research local ordinances, policies, court decisions, etc.

Good luck with your program. I see no deficiencies in your program instructions. FRED has shown to be tremendously cost effective to the taxpayers while protecting all rights of the applicants. I hope your experience in San Francisco will be comparable to that of other counties in the State. Please give me a call at (916) 445-0031, if any assistance can be provided.

Sincerely,

Rick Tibbetts
Fraud Program Management Bureau

Attachment

40-157 PRINCIPLES AND METHODS OF DETERMINING ELIGIBILITY (Continued) 40-157

.2 Methods of Gathering Evidence

.21 The gathering of evidence necessary to make an eligibility determination of an applicant is a joint responsibility of the applicant and the county.

.211 The county shall inform the applicant what evidence is desired, why it is needed and how it will be used.

.212 The applicant shall cooperate with the county in the evidence gathering process to the fullest extent possible.

.213 When it is not possible for the applicant to obtain necessary evidence, the county shall obtain it for him.

.22 When needed in the evidence gathering process, and as evidence of the applicant's consent thereto, a specific consent form, signed by the applicant and, if necessary, by the spouse (by both parents in AFDC when this is possible) shall be obtained for each such contact. The consent form should cover the purpose of the specific contact as well as the individual or agency to be consulted. Form 228, Applicant's Authorization for Release of Information, may be used for this purpose. A signed consent form is not required when public records are used or for the purposes of verifying information obtained through IEVS in accordance with Section 20-006.5.

.3 Participation by the Applicant

If the applicant is able to assist in resolving incomplete, unclear or inconsistent statements on the Form CA 2 or is able to assist in the evidence gathering process but refuses to do either or both, the application shall be denied.

40-159 SPECIAL PROVISIONS FOR DETERMINING ELIGIBILITY 40-159

.1 Aid Received Previously in Another County

When aid was received previously in another county, the county to which the recipient has moved will be responsible for determining the recipient's continued eligibility for payment of aid.

20-006 INCOME AND ELIGIBILITY VERIFICATION SYSTEM (IEVS) REQUIREMENTS (Continued) 20-006

.5 Verification of IEVS Information

.51 Upon receipt of the IEVS matched data, the CWD shall review and compare the IEVS information against information contained in the case record to determine whether it affects the applicant's or recipient's eligibility or amount of benefits.

.52 *Factors to be considered in determining the applicability of the information include: complete and positive match between the IEVS-obtained information and identifying case information, i.e., first, middle and last name, SSN, age and date of birth; agreement with other information contained in the case record or otherwise available to the CWD; and appropriateness of the information in relationship to the known circumstances of the applicant or recipient.*

.53 IEVS Information Considered Verified Upon Receipt

.531 IEVS information received directly from the income/benefit source shall be considered verified upon receipt. Such information includes Social Security and SSI benefit information from SSA, AFDC benefit information from another county or state, and unemployment insurance and disability insurance benefits from this or another state.

.532 If the IEVS information is determined to be applicable to case circumstances, the CWD shall take appropriate case action without additional verification/documentation of the information or shall note in the case file that no action is required.

.533 If based on other information available to the CWD, information from a particular income or benefit source is questionable or, if based on past experience, there is reason to doubt the applicability of the IEVS-obtained information, the CWD shall independently verify the information as specified in Section 20-006.54.

.54 IEVS Information Requiring Independent Verification

.541 For IEVS information received from a secondary source which includes wage information reported by EDD, SSA or a wage reporting agency in another state; and unearned income from IRS or FTB; and for IEVS-obtained information which the CWD considers questionable in accordance with Section 20-006.533, the CWD shall not terminate, deny or reduce benefits based on this information until the information has been independently verified.

.542 Independent verification shall include verification of the amount of the asset or the income involved; determination whether the recipient actually has or had access to such asset or income; and identification of the period(s) when the individual actually had the asset or income.

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DEPARTMENT OF SOCIAL SERVICES
P. O. Box 7988, San Francisco, CA 94120

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FRED COMMUNITY ADVISORY COMMITTEE

Minutes of the July 18, 1990 Meeting

The eighth meeting of the FRED Community Advisory Committee was held on Wednesday, July 18, 1990 at 9 a.m. at 170 Otis Street in the 8th Floor Conference Room.

PRESENT

John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator - DSS FRED Program
Raymond Colmenar, Policy Analyst, DSS
Ylonda Calloway, Eligibility Worker Supervisor - DSS FRED Program
Ana Martinez, Social Worker - DSS FRED Program
Kim Stepney, Eligibility Worker Supervisor - DSS FRED Program
Claire Batiquin, Eligibility Worker Supervisor - DSS FRED Program
Tony Arturi, Assistant Director - AFDC Program
Julia Velson, Homeless Advocacy Project
Laura Ware, Hamilton Family Center
Virginia Leyva, SF Neighborhood Legal Assistance Foundation
Robert Capistrano, SF Neighborhood Legal Assistance Foundation
Sandy Weiner, Income Rights Project
Josh Brandon, Coalition on Homelessness
Louise Rainey, Secretary, Social Services Commission

REFERRAL CRITERIA REVIEW

AFDC-Homeless #5: By general consent, the FCAC agreed to additional clarifying language (underlined):

This is the second incident of homelessness within a thirteen month period and applicant has never received a permanent payment.

AFDC HOMELESS

AFDC-Homeless #4: By general consent, the FCAC agreed to move the criteria to the first AFDC-Homeless category which directs to refer if two or more of the elements are present; and also to add other verifiable proof as follows (additions underlined):

Category One - No. 7: Client's proof of homelessness is other than a verifiable legal eviction notice or (1) letter from a shelter documenting an attempt to stay in a shelter, (2) verifyiable letter from a landlord or master tenant stating they have vacated the premise, (3) a lock-out letter from a legal service provider.

AFDC-Homeless #1: By general consent, the FCAC agreed to additional clarifying language (underlined):

The permanent Homeless Assistance payment is for a location where the client lived previously within the last six months.

REVISION OF FRED REFERRAL FORM

Michael Hancock reported that he, Claire Batiqin and Sandy Weiner had met to discuss the revision of the FRED referral form as requested. Progress was made.

Discussion included the advocate's request that the following information be included in the referral form: questionable information, client's efforts, EW's efforts, and timeline.

By general consent, the matter was taken under consideration and the department will bring their recommendation to the next meeting.

REFERRAL CRITERIA REVIEW — General Assistance #1: By general consent, it was agreed that Michael Hancock, Kim Stepley and Julia Velson will work on clarifying language and present it to the FCAC at the next meeting.

-

GENERAL ASSISTANCE

NEXT MEETING — By general consent, it was agreed to meet again on Wednesday, July 25th at 9 a.m.

ADJOURN — There being no further business, Mr. Vera adjourned the meeting at 11 a.m.

Louise Rainey, Secretary
Social Services Commission

City and County of San Francisco

Department of Social Services

JV FYI MM
cc Roy. Carley TASK Force 7/19/90

JUNE 1990

STATISTICS & DISPOSITION

Program	Total	Granted	Continued	Denied	Reduced	Withdrawn	Discontinued
AFDC: 32							
INTAKE	11	7	1	1	0	1	1
CARRYING	21	0	12	0	0	0	9
PAFS	0	0	0	0	0	0	0
AFDC HOMELESS	40	20	3	13	0	2	2
GA	13	4	3	0	0	0	6
NAFS	4	0	0	2	0	0	2
MEDI-CAL	0	0	0	0	0	0	0
total	89	31	19	16	0	3	20

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the July 25, 1990 Meeting

The 9th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, July 25, 1990 at 9 a.m. at 170 Otis Street in the 8th floor conference room.

PRESENT

Marilyn Chow, President, Social Services Commission
John R. Vera, Assistant General Manager, DSS
Raymond Colmenar, Policy Analyst, DSS
Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS FRED Program
Ana Martinez, Social Worker, DSS FRED Program
Kim Stepney, Eligibility Worker, DSS FRED Program
Rita Semel, United Way Sub-Committee on Homelessness
Julia Velson, Homeless Advocacy Project
Virginia Leyva, SF Neighborhood Legal Assistance
Sandy Weiner, Income Rights Project
Bill Hirsch, Tenderloin Self Help Center
Robert Capistrano, SF Neighborhood Legal Assistance
Tony Arturi, Assistant Director, AFDC Program
Louise Rainey, Secretary, Social Services Commission

AFDC HOMELESS REFERRAL CRITERIA

By general consent the FCAC approved the following criteria with the understanding that re Nos. 3-4-5 (1st set) and No. 3 (2nd set) additional data was promised:

Refer if TWO or more of these elements are present:

1. The permanent homeless assistance is for a location where client lived within the past six months.
2. The permanent payment is made to a location which is owned by the absent parent or the UAM of the client.
3. This is the second incident of homelessness within a thirteen month period, and applicant has never received a permanent payment.
4. Once homeless assistance has been denied the client alters the explanation or provides different verification which the eligibility is unable to verify.
5. Client's proof of homelessness is other than a verifiable (from the Sheriff's office) legal eviction notice, or a letter from a shelter, or landlord, or master tenant, or a "lock-out letter" from a legal service provider.

Refer if ONE or more of these elements are present:

1. The receipt appears to be altered and the client cannot give a satisfactory and/or verifiable explanation for the alteration.
2. The receipt appears to be a fake, based on contact with the person who completed it.
3. The client currently receiving homeless assistance is not able to give verifiable information about the location of the pervious week's residence.

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REQUEST FOR INFORMATION

In response to Ms. Weiner's written request, the following was agreed by general consent:

1. The informational brochure re the FRED Program which is provided to all applicants's in their intake packets.
   No later than Friday, July 27, 1990.
2. The program informational memo's sent to the Supervisors and the EW's re the new FRED procedures.
   A memo will be issued immediately reminding EW's of their responsibilities associated with FRED referrals.
3. The referral forms for June & July (with names and other identifying information whited out).
   DSS will provide data it is currently collecting electronically.
4. The memo (or draft if not yet sent out) of the revised Homeless Assistance referral criteria which was (or will be) sent out to the EWs.
   It will be sent out immediately and is effective August 1st.

CUMENTATION OF REFERRAL

Discussion included the feasibility of documenting the reasons for a FRED referral on the referral form itselt, rather than continue the practice of maintaining that narrative in the client's case file.

By general consent, it was agreed that rather than maintain a case file narrative documenting the reasons for referral to the FRED Program, EW's would be instructed to document the reasons for referral on the FRED referral form itself and place a copy of the form in the client's case file.

The documentation of referral to the FRED Program is to include:

- . what information/document is questionable
- . efforts made by the client to verify - or not made
- . efforts made by the EW to verify - or not made
- . timeline for completion of verification as appropriate to the case

RANDOM SAMPLING

It was a greed by general consent, that as a one time experiment; one of every ten FRED referral forms will be whited out and given to the advocates for a random sampling to determine if such a sampling is of value. Michael Hancock will furnish the forms at the August 1st meeting.

COST BENEFIT

Raymond Colmenar presented the estimated fraud prevention costs and benefits based on the first four months of actual experience. (SEE ATTACHMENT)

GENERAL ASSISTANCE REFERRAL CRITERIA

By general consent, it was agreed to consider these criteria at the August 1 meeting and to invite the expertise of the GA Procedures & Policy Committee to join the discussion.

ELECTRONIC DATA COLLECTION FORMAT

John Vera presented the electronic data collection format now being used by DSS and asked Mr. Hancock to present his timeline for completion of data input at the August 1 meeting and to provide copies of the data to date at that meeting.

NEXT MEETING

By general consent, it was agreed to meet again on Wednesday, August 1 at **10 a.m. - PLEASE NOTE CHANGE IN TIME.**

ADJOURN

There being no further business, Mr. Vera adjourned the meeting at 11 a.m.

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

TABLE I
ESTIMATED FRAUD PREVENTION COSTS AND BENEFITS
BASED ON FIRST FOUR MONTHS OF ACTUAL EXPERIENCE

	SAVINGS				TOTAL		NET
	AFDC	AFDC Homeless	GA	FS	SAVINGS	Costs	SAVINGS
Four Months	$102,300	$90,690	$7,161	$850	$201,001	$127,775	$73,226
Federal	$51,150	$45,345		$850	$97,345	$63,888	$33,458
State	$46,035	$40,811			$86,846	$31,944	$54,902
Local	$5,115	$4,535	$7,161		$16,811	$31,944	($15,133)
One Year	$694,276	$264,433	$57,629	$10,965	$1,027,303	$383,325	$643,978
Federal	$347,138	$132,217		$10,965	$490,320	$191,663	$298,657
State	$312,424	$118,995			$431,419	$95,831	$335,588
Local	$34,714	$13,222	$57,629		$105,564	$95,831	$9,733
Casemonths*							
Four Months	150	92	21	10			
One Year	1,018	276	169	129			
Grant Amt.	682	630	341	85			
		1,091					

*Assumes 5 percent of those discontinued or denied reapply successfully for aid based on experience to date

PLEASE NOTE MEETING WEDNESDAY, AUGUST 15TH IS AT 10 A.M.

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8/90

CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the August 8, 1990 Meeting

The 11th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, August 8, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

John R. Vera, Assistant General Manager, DSS
Anthony Arturi, Assistant Director, DSS AFDC Program
Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS
Rita R. Semel, United Way Sub-Committee on Homelessness
Julia Velson, Homeless Advocacy Project
Laura Ware, Hamilton Family Center
Josh Brandon, Coalition on Homelessness
Cecilia Esguerra, Income Rights Project

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GENERAL ASSISTANCE REFERRAL CRITERIA

By general consent, the FCAC approved the new referral criteria for the General Assistance program as follows: (Criteria immediately effective.)

Refer if ONE of these elements are present:

1. Applicants/recipients who have Social Security numbers different than those on file (case file and automated records) including, but not limited to multiple cases and multiple Social Security numbers, or deny ever living in states where the Social Security number was issued. The Eligibility worker must attempt to verify the Social Security number or resolve any conflict prior to referral.

2. Applicants/Recipients who provide verbal and/or written information that is in conflict with know facts or information obtained during the past year, and which would affect eligibility or the amount of benefits for which the client is eligible. The Eligibility Worker must attempt to resolve any conflict prior to referral.

SB2454

John Vera stated SFDSS has not as yet received direction from the State re the implementation of SB2454 and continues to use SFDSS FRED regulation while awaiting State guidelines. The department is attempting to determine what hearing format the State will employ re SB2454.

Rita Semel suggested the FCAC share with the State the criteria they have developed with the department for the implementation of the SF FRED program.

Discussion followed.

Josh Brandon suggested the FCAC utilize the Assembly offices of Brown and Burton to advocate for the implementation of the SF FRED model rather than the Orange County model.

John Vera stated he will review the FCAC actions and suggestions with General Manager Julia Lopez and schedule the next FCAC to accomodate her attendance so that she may address the Committee.

NEXT MEETING — The FCAC will meet again on Wednesday, August 15th at **10 a.m.** in the 8th floor conference room at 170 Otis Street.

AGENDA

1. DSS Direction re the FRED Program - Julia I. Lopez
2. Update re advocate activity with legislators - Josh Brandon

ADJOURN — There being no further business, John Vera adjourned the meeting at 11:15 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the August 15, 1990 Meeting

The 12th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, August 15, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT
Julia I. Lopez, General Manager, DSS
John R. Vera, Assistant General Manager, DSS
Anthony Arturi, Assistant Director, DSS AFDC Program
Michael Hancock, Coordinator, DSS FRED Program
Ylonda Calloway, Eligibility Worker Supervisor, DSS FRED Program
Julia C. Velson, Homeless Advocacy Project
Rita R. Semel, United Way Sub-Committee on Homelessness
Sandy Weiner, Income Rights Project
Robert Capistrano, SF Neighborhood Legal Assistance Project
Judy Blochowiak, General Assistance Advocacy Project
Laura Ware, Hamilton Family Center
Josh Brandon, Coalition on Homelessness
Louise Rainey, Secretary, Social Services Commission

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SB2454
General Manager Julia Lopez assured the SF DSS will implement the FRED Program as planned until told differently. Ms. Lopez commented that SB2454 does not seem to contain anything that would prevent SFDSS from implementing their program as planned. The only difference between SFDSS's plan and SB2454 seems to be the incentive offered to counties using peace officers. Ms. Lopez commented SFDSS feels it is worthwhile to forego the incentive and use eligibility workers as planned. Ms. Lopez anticipates the implementation of the program will be closely monitored and she expects the refining work done by the FCAC will be seen as a model. Also, Ms. Lopez anticipates there will be ample opportunity for comment and the department will work with the community in that regard. Finally, Ms. Lopez thanked the FCAC for their continuing good work.

REFERRAL FORM
By general consent, it was agreed that the FRED Referral form would contain the following four points in some succinct form:
1. what information is questionable
2. what is client supposed to provide
3. eligibility worker's attempts to verify
4. time frame for compliance

COMPLAINT FORM
By general consent, it was agreed the FRED worker will send a copy of the referral form and the complaint form to the client, at the point where Juan Galvan, Eligibility Worker Supervisor, approves the referral.

By general consent, it was agreed that for Homeless Assistance clients, copies of the referral and complaint forms will be given at the time when the client is scheduled for a home visit.

NEXT MEETING
By general consent, it was agreed to meet again on Wednesday, August 22nd at 10 a.m. at 170 Otis Street, 8th floor conference room.

AGENDA
The agenda will include: (1) client's requests, (2) cover sheet draft, (3) AFDC.

ADJOURN There being no further business, John Vera adjourned the meeting at 11:30 a.m

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the August 22, 1990 Meeting

The 13th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, August 22, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS
Alba Schuschereba, Supervisor, AFDC
Rita Semel, United Way Sub-Committee on Homelessness
Virginia Leyva, SF Neighborhood Legal Assistance
Sandy Weiner, Income Rights Project
Laura Ware, Hamilton Family Center
Louise Rainey, Secretary, Social Services Commission

REFERRAL FORM AND COVER SHEET Sandy Weiner presented draft language. Discussion followed and revisions were made. SEE ATTACHMENT ONE.

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UPDATES Rita Semel reported she had contacted Speaker Brown's office and they stand ready to assist the FCAC in their efforts re 2454.

Michael Hancock reported the State is currently refining the 2454 language and a policy/procedure/protocol are expected within the next month.

NEXT MEETING By general consent, it was agreed to meet again on Wednesday, August 29, 1990 at 10 a.m. in the 8th floor conference room at 170 Otis.

AGENDA AFDC CRITERIA -
1. Adoption of Referral Form and Cover Sheet draft
2. Consideration of staff's recommendation to delete No. 3-5-6-8-11
3. Consideration of staff's recommendation to revise the language of No. 4 & 9
4. Consideration of an additional criteria re multiple Social Security numbers
5. Consideration of a criteria addressing anonimous FRED referra

ADJOURN There being no further business, Michael Hancock adjourned the meeting at 11:30 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

DRAFT

The law requires the Department of Social Services to verify all of the information you provide:

1. This may be done by running computer checks on your social security numbers through various public records.

2. The Department of Social Services needs to contact any third party, we must ask you to sign a consent form giving us permission to call.

3. A referral may be made if any of the following situations apply:.....

4. A referral does not mean that we think you committed fraud, it merely means that further verification is required to ensure that you receive the benefits to which you are entitled.

5. A FRED worker will meet you in the office to talk about how the worker will verify information. The worker may have to verify where you are currently staying, and will also have to verify that you have left your last home.

6. If you are applying for AFDC or are undergoing a recertification, the FRED Unit must mail you a copy of the referral form so that you understand why your case was referred and what information they must clarify

7. If you are referred to FRED you have the following rights:

   a. An appointment must be scheduled prior to coming to your home.
   b. Your written permission must be given for conversations with any third party.
   c. Your aid cannot be delayed pending the investigation. This means homeless assistance and immediate need checks must still be granted within 24 hours if you are eligible.
   d. You must be given a copy of the FRED referral form and a complaint form. If you are dissatisfied with the manner in which the investigation was conducted, you may fill in and mail the complaint form
   e. Whether aid is denied, approved or reduced, if you need additional services; you can be referred to a social worker to provide you access to other services or resources within the community.

8. If you are dissatisfied with the manner in which the investigation was conducted, feel you were treated unfairly, or that your rights were violated you may contact the FRED Program Supervisor (557-6501) or the following legal assistance agencies: IRP, GAAP, SFNLAF, or TSHC.

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the August 29, 1990 Meeting

The 14th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, August 29, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS
Julia C. Velson, Homeless Advocacy Project
Virginia Leyva. SF Neighborhood Legal Assistance
Sandy Weiner, Income Rights Project
Laura Ware, Hamilton Family Center
Louise Rainey, Secretary, Social Services Commission

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FRED REFERRAL FORM AND COVER SHEET — Michael Hancock presented a second version of the draft discussed at the 8/22/90 FCAC Meeting. Discussion followed and it was agreed to present the draft to client community and illicit their input. By general consent, it was agreed to continue the discussion to the September 5, 1990 meeting.

AFDC REFERRAL CRITERIA — Aid to Families with Dependent Children:
Refer if one or more of these elements is present:

1. By general consent, it was agreed to revise language as follows: Expenses exceed reported income and client does not provide clarifying information.
2. By general consent, it was agreed to delete the criteria.
3. By general consent, it was agreed to delete the criteria.
4. By general consent, it was agreed to revise as follows: Applicants/Recipients who provide verbal and/or written information that is in conflict with know facts or information obtained during the past year, and which would affect eligibility or the amount of benefits for which the client is eligible, the Eligibility Worker must attempt to resolve any conflict prior to referral.
5. By general consent, it was agreed to delete the criteria.
6. By general consent, it was agreed to delete the criteria.
7. By general consent, it was agreed to revise language as follows: Applicant who reapplies for aid within two months of date of discontinuanc claiming marital separation, when the case was previously discontinued due to spouse goint to work.
8. By general consent, it was agreed to delete the criteria.
9. By general consent, it was agreed to continue discussion of Criteria 9 to the September 5th meeting.
10. By general consent, it was agreed to delete the criteria.

AFDC REFERRAL CRITERIA - continued

11. By general consent, it was agreed to adopt specific language re social security numbers as follows:

Applicants/Recipients who have Social Security numbers different than those on file (case file and automated records) including, but not limited to multiple cases and multiple Social Security numbers (SSN), or deny ever living in states where the SSN was issued; the Eligibility Worker must attempt to verify the SSN or resolve any conflict prior to referral.

By general consent, it was agreed to continue the discussion re anonymous calls to the September 5th meeting.

NEXT MEETING

By general consent, it was agreed to meet again Wednesday, September 5 at 10 a.m. at 170 Otis in the 8th floor conference room.

AGENDA

AFDC CRITERIA - 1. Adoption of the FRED Referral Form and Cover Sheet draft
2. Consideration of Criteria 9
3. Consideration of Criteria 11 re anonymous calls.

ADJOURN

There being no further business, Michael Hancock adjourned the meeting at 11:50 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the September 5, 1990 Meeting

The 15th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, August 29, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

John R. Vera, Assistant General Manager
Juan Galvan, Eligibility Worker Supervisor, DSS
Rita Semel, United Way Sub-Committee on Homelessness
Judy Blochowiak, General Assistance Advocacy Project
Sandy Weiner, Income Rights Project
Virginia Leyva, SF Neighborhood Legal Assistance
Laura Ware, Hamilton Family Center
Louise Rainey, Secretary, Social Services Commission

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CHECK LIST

Sandy Weiner requested clarification re the frequency of the random sampling of the referral form. John Vera confirmed that random samplings will be made available to FCAC on an on-going basis. Further, Mr. Vera assured that FCAC will be provided with copies of the Directive to Staff re the revision of the FRED Criteria for the GA and AFDC programs.

REFERRAL FORM AND COVER SHEET

By general consent the FCAC approved the referral form and cover sheet as follows:

FRED AND THE PUBLIC ASSISTANCE PROCESS

The law requires the Department of Social Services to verify all of the information you provide. To accomplish this task, the Department has established an early fraud detection and prevention program that is responsible for verifying all of the information presented in the statement of facts through various methods, including but not limited to computer checks on your social security numbers, and a review of various public records. Your eligibility worker may refer your case to FRED if certain circumstances can not be satisfactorily resolved.

A referral to FRED does not mean that you have committed fraud. It simply means that further verification is needed to insure that you receive the benefits to which you are entitled.

If you are applying for Homeless Assistance and a FRED referral is made, a FRED worker may meet you in the office to talk about how the information you have submitted will be verified. The FRED worker may verify your current and prior residence.

If you are referred to FRED you have the following rights:

1. An appointment must be scheduled prior to coming to your home.
2. If it is necessary to contact other persons to verify information, FRED must request written premission.
3. Your aid can not be delayed pending the investigation. This means homeless assistance and immediate need checks must still be granted within 24 ours if you are eligible.
4. You must be sent, or given, a copy of the FRED referral form and a complaint form. If you are dissatisfied with the manner in which the investigation was conducted, you may fill in and mail the complaint form.

5. Whether aid is denied, approved or reduced, if you feel the need for additional services, you can be referred to a social worker who will provide you access to other services or resources within the community.

If you are dissatisfied with the manner in which the investigation was conducted, fell that you were treated unfairly, or that your rights were violated, you may contact the FRED Program Supervisor (557-5285), or the followibng legal assistance agencies: Income Rights Project (431-9771), General Assistance Advocacy Project (928-8191), San Francisco Neighborhood Legal Assistance Foundation (627-0200), or Homeless Advocacy Project (974-65

AFDC REFERRAL CRITERIA By general consent, it was agreed that Criteria No. 9 be continued to the next meeting for further consideration. Also continued to the next meeting was the discussion regarding anonymous calls.

NEXT MEETING By general consent, it was agreed to meet again on Wednesday, September 12th at 10 a.m., 170 Otis Street - 8th floor conference room.

AGENDA
1. consideration of Food Stamp Program referral criteria
2. adoption of revisions to the referral criteria previously made
3. consideration of the complaint procedure.

ADJOURN There being no further business, Mr. Vera adjourned the meeting at 11:30 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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Department of Social Services
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FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the September 12, 1990 Meeting

The 16th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, September 12, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS FRED Program
Andrew Goberman, Food Stamp Supervisor, DSS
Alba Schuschereba, AFDC Supervisor, DSS
Judy Blochowiak, General Assistance Advocacy Project
Robert Capistrano, SF Neighborhood Legal Assistance
Sandy Weiner, Income Rights Project
Julia Velson, Homeless Advocacy Project
Cecilia Esguerra, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

FRED PACKET

Juan Galvan distributed the "FRED Packet" compiled of FRED materials/forms as revised by the FCAC.

By general consent, it was agreed to continue consideration of the FRED Packet materials for one week to all sufficient time for scrutiny of the documents.

PROCEDURE RE ANONYMOUS CALLS

Michael Hancock reported the FRED Unit's procedure re anonymous calls is as follows: - log information
- refer information to program supervisor

AFDC CRITERIA 9

By general consent, it was agreed to continue consideration of AFDC Criteria No. 9 for one week.

NON ASSISTED FOOD STAMP CRITERIA

Andrew Goberman presented draft alternative language for the Non-assisted Food Stamp referral criteria.

By general consent, the follow was agreed to: Language agreed to underlined.

1. When household composition or changes in household composition are questionable and affect eligibility and benefits, such as:

   A. Applicant/recipient claims separate living unit at same address as sibling, parent or spouse who would otherwise be required to be included in the Food Stamp household.
   Continued for one week.

   B. Applicant/recipient claims sibling, parent or spouse has moved, after denial within previous three months based on household composition at that address.

2. Applicants/recipients who provide verbal and/or written information that is in conflict with known facts or information obtained during the past year, and which would affect eligibility or the amount of benefits for which the client is eligible. The Eligibility Worker must attempt to resolve any conflict prior to referral.

NON ASSISTED FOOD STAMP CRITERIA - continued

3. It was agreed to delete the draft language and that further consideration would be given to a possible addendum to Criteria #2 at next week's meeting.

COMPLAINT PROCEDURE

Juan Galvan described the Complaint Procedure:

- complaint received by FRED Unit
- supervisor discusses complaint with FRED worker
- supervisor discusses complaint with client
- supervisor narrates findings for the record
- supervisor narrates corrective action taken for the record
- copy of the transaction is kept on file for the State
- client is furnished a copy of the complaint with narrative

NEXT MEETING

By general consent, it was agreed to meet again on Wednesday, September 19th at 10 a.m. in the 8th floor conference room at 170 Otis.

AGENDA

1. Consideration of the content of the FRED Packet
2. Consideration of AFDC Criteria No. 9
3. Consideration of NAFS Criteria No. 1.A.
4. Consideration of an possible addendum to NAFS Criteria #2.
5. Consideration of the Complaint Procedure

ADJOURN

There being no further business, the meeting was adjourned by Michael Hancock at 11:40 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the September 19, 1990 Meeting

The 17th minutes of the FRED Community Advisory Committee (FCAC) was held on Wednesday, September 19, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, DSS FRED Program
Laura Ware, Community Housing Partnership
Sandy Weiner, Income Rights Project
Dick Clark, Hamilton Family Center
Rita Semel, United Way Sub-Committee on Homelessness
Julia Velson, Homeless Advocacy Project
Robert Capistrano, SF Neighborhood Legal Assistance
Virginia Leyva, SF Neighborhood Legal Assistance
Cecilia Esguerra, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

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ANNOUNCEMENTS

John Vera applauded the FCAC on their work and announced that their work had been acknowledged by the State.

John Vera reported the SF Board of Supervisors Finance Committee will be considering the department's FRED Quarterly Report at their meeting on Wednesday, October 10th. FCAC members are invited to attend the Finance Committee meeting and copies of the FRED Quarterly Report will be made available to them.

AFDC REFERRAL CRITERIA RE UNDOCUMENTED CHILDREN

After lengthy discussion, it was agreed to continue the matter to the next meeting at which time the department will offer its recommendation for consideration.

CHANGES IN AFDC REFERRAL CRITERIA

John Vera confirmed that the memo to workers re the implementation of of changes to the AFDC Referral Criteria will be sent out immediately.

NAFS CRITERIA

Juan Galvan stated that he had checked with the State and ascertained that they did not have a definition for the term "separate living unit" and after lengthy discussion, it was agreed to continue the consideration of the Referral Criteria for the Non-Assistance Food Stamp Program to the next meeting.

FRED PACKET — Sandy Weiner requested an update re the following AFDC Homeless Referral Criteria:

3. The client currently receiving homeless assistance is not able to give verifiable information about the location of the previous weeks residence.

COMPLAINT PROCEDURE — Sandy Weiner presented a list of suggestions re the Complaint Form. (See Attachment One)

NEXT MEETING — By general consent, it was agreed to meet again on Wednesday, September 26th at 10 a.m., in the 8th floor conference room at 170 Otis.

AGENDA

1. Consideration of department recommendation re AFDC Referral Criteria re Undocumented Children
2. Consideration of department recommendation re Referral Criteria for the Non-Assistance Food Stamp Program
3. Consideration of the content of the FRED Packet
4. Consideration of the Complaint Procedure

ADJOURN — There being no further business, the meeting was adjourned at 11:35 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

ATTACHMENT ONE

PROPOSED COMPLAINT PROCEDCURE

1) Phone number to register complaints should also be listed. (Especially for cases involving homeless assistance). All phone-in complaints should be logged in.

2) Responses to complaints should be completed within 5 days, except for homeless assistance cases which should be completed in 1 day.

3) At least three attempts should be made to contact complainants. This should include, at a minimum a letter to the person's last known address and a letter to the designated Authorized Advocate.

4) People should be given a stamped, addressed envelope with the complaint forms.

5) All responses should be translated into people's primary languages.

6) Complaint forms should be revised to include a space to list the complainant's authorized representative. A copy of the response should be sent to the A.R. as well.

7) The complaint form should be revised to include the following statement: "If you feel beneits may still be owed to you, you might have a right to appeal. for assistance call the General Assistance Advocacy Project, Homeless Advocacy Project, Income Rights Project or San Francisco Neighborhood Legal Assistance Foundation.

8) If, as a result of the complaint, it was determined that benefits were erroneously denied the FRED unit must contact the E.W. and ensure that the case is re-evaluated within 3 working days (1 working day for homeless assistance) and that benefits are denied or issued by the end of the third working day (or next day for homeless assistance cases).\

9) The oversight committee should be given copies of all complaints (and responses) within 30 days of filing. All client identifying information should be marked out.

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Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the September 26, 1990 Meeting

The 18th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, September 26, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator, DSS FRED Program
Tony Arturi, Assistant Director - AFDC
Juan Galvan, Eligibility Worker Supervisory, FRED Program
Laura Ware, Community Housing Partnership
Sandy Weiner, Income Rights Project
Julia Velson, Homeless Advocacy Project
Cecilia Esguerra, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

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NOUNCEMENTS

John Vera announced the department had met with the State AFDC Integrity Bureau responsible for the implementation of 2454. In the discussions, the department shared their experience in working with the FCAC.

AFDC REFERRAL CRITERIA

By general consent, it was agreed that the AFDC Referral Criteria would read as follows:

Refer if one or more of these elements is present:

1. Expenses exceed reported income and client does not provide clarifying information.
2. Applicants/Recipients who provide verbal and/or written information that is in conflict with known facts or information obtained during the past year, and which would affect eligibility or the amount of benefits for which the client is eligible, the Eligibility Worker must attempt to resolve any conflict prior to referral.
3. Applicant who reapplies for aid within two months of date of discontinuance, claiming marital separation, when the case was previously discontinued due to spouse going to work.
4. Applicants/Recipients who have Social Security numbers different than those on file (case file and automated records) including, but not limited to multiple cases and multiple Social Security numbers (SSN), or deny ever living in states where the SSN was issued; the Eligibility Worker must attempt to verify the SSN or resolve any conflict prior to referral.

NON ASSISTANCE FOOD STAMPS

By general consent, it was agreed that the Non Assistance Food Stamp Referral Criteria would read as follows:

Refer if one or more of these elements is present:

NAFS - continued

1. When household composition or changes in household composition are questionable and affect eligibility and benefits, for example: Applicant/recipient claims sibling, parent or spouse has moved, after denial within previous three months based on household composition at that address.
2. Applicants/recipients who provide verbal and/or written information that is in conflict with known facts or information obtained during the past year, and which would affect eligibility or the amount of benefits for which the client is eligible. The Eligibility Worker must attempt to resolve any conflict prior to referral.

FRED PACKET

By general consent the FRED Package was approved as distributed.

COMPLAINT PROCEDURE

The proposed complaint procedure was adopted as amended (see underlined) by general consent:

1. Phone number to register complaints should also be listed. Especially for cases involving homeless assistance). All phone-in complaints should be logged in and a complaint form should be forwarded to the complainant.
2. Initial contact within 5 days and resolution within 30 days, except for homeless assistance cases which should be completed in 1 day.
3. At least three attempts should be made to contact complainants. This should include, at a minimum a letter to the person's lask known address and a letter to the designated Authorized Advocate.
4. Complainants should be given a stamped, addressed envelope with the complaint forms.
5. All responses should be translated into people's primary languages.
6. Complaint forms should be revised to include a space to list the complainant's authorized representative. A copy of the response should be sent to the authorized representative as well.
7. Replaced by the following to be placed in bold print: **THIS IS NOT A REQUEST FOR A FAIR HEARING.**
8. Deleted
9. Continued to the meeting of October 3.

NEXT MEETING

By general consent, it was agreed to meet again on Wednesday, October 3rd at 10 a.m. in the 8th floor conference room at 170 Otis.

AGENDA

1. Consideration of Complaint Procedure No. 9
2. FRED data breakdown for August

ADJOURN

There being no further business, the meeting was adjourned at 11:40 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the October 3, 1990 Meeting

The 19th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, October 3, 1990 at 10 a.m., 170 Otis Street, 8th floor conference rrom.

PRESENT — John R. Vera, Assistant General Manager, DSS
Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Rita R. Semel, United Way - Subcommittee on Homelessness
Julia C. Velson, Homeless Advocacy Project
Robert Capistrano, SF Neighborhood Legal Assistance
Laura Ware, Community Housing Partnership
Sandy Weiner, Income Rights Project
Cecilia Esguerra, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

NNOUNCEMENTS — The FRED Quarterly Report to the Board of Supervisors Finance Committee will be presented Wednesday, October 10 at 2 p.m. The department's report will be available to the community for review prior to presentation to the Board.

FRED DATA — Lengthy discussion took place re the need to generate data and the department's lack of resources to meet that need. John Vera stated the department will check with the CDS Manager and determine if a program can be designed to extract the desired data.

By general consent, the matter was continued to the next meeting.

COMPLAINT FORM REC #9 — The 9th recommendation submitted by IRP re the Complaint form was discussed. Various concerns re confidentiality and undue scrutiny arose.

By general consent, it was agreed that the department will give the community information regarding complaints, but will first look at the best format to employ in doing so; and further, that the matter be continued for one week.

FCAC FUTURE — John Vera stated it would be worthwhile to periodically convene the FCAC to review the FRED implementation procedure so as to determine statistical data, review complaints, and check for cost efficiency.

By general consent, it was agreed to continue the matter for one week.

ROLE OF FCAC IN FRED TRAINING — In response to the advocate's request, John Vera invited the FCAC to address the trainees re their prospective as advocates. A training schedule will be furnished to the FCAC.

NEXT MEETING — By general consent, it was agreed to meet again on Wednesday, October 10th at 10 a.m. in the 8th floor conference room at 170 Otis.

AGENDA
1. FRED Quarterly Report to the Board of Supervisors
2. Automated information
3. Complaint Form Recommendation No. 9
4. FCAC Future

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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P. O. Box 7988, San Francisco, CA 94120

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FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the October 10, 1990 Meeting

The 20th meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, October 3, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT — Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Virginia Leyva, SF Neighborhood Legal Assistance
Julia Velson, Homeless Advocacy Project
Rita R. Semel, United Way - Subcommittee on Homelessness
Louise Rainey, Secretary, Social Services Commission

FRED REPORT TO BOARD'S FINANCE COMMITTEE — Michael Hancock reported the Board of Supervisor's will not consider the FRED Quarterly Report this afternoon and a new date for consideration has not yet been set.

FRED DATA — Statistical data re FRED was distributed. (SEE ATTACHMENTS A, B, C)

FRED COST FECTIVENESS — Michael Hancock reported that after discussion with the department's CDS Manager, it had been determined that a manual program could be in place to deal with October statistics.

By general consent, it was agreed that the time frame used by the City should correlate with the cost saving formula.

FRED FUTURE — By general consent, it was agreed that the FCAC would next meet on Wednesday, November 7th at 10 a.m., 170 Otis, 8th floor conference room. Additionally, it was agreed that thereafter the FCAC would meet monthly on the third Wednesdays of the month.

COMPLAINT FORM REC #9 — Michael Hancock stated the department will furnish the advocates copies of all complaints except those which denote personnel issues. In the case of personnel issues the advocates will be advised that a complaint has been made and the reason for withholding the copy.

NEXT MEETING — By general consent, it was agreed to meet next on Wednesday, November 7th 10 a.m., 170 Otis Street, 8th floor conference room.

ADJOURN — There being no further business, Michael Hancock adjourned the meeting at 11:10 a.m.

Louise Rainey
Louise Rainey, Secretary
Social Services Commission

ATTACHMENT A

FRED CUMULATIVE STATISTICS

Program	Ref.	Granted	Cont.	Denied	Reduced	Withdrew	Disced	Totals Pos.	Totals Neg.	Pos.	Neg.
AFDC											
(3/90) intake	19	14	0	4	0	1	0	14	5	14	5
carrying	40	0	28	0	0	1	11	28	12	28	12
(4/90) intake	14	6	0	7	0	0	1	6	8	6	8
carrying	18	0	10	0	0	0	8	10	8	10	8
(5/90) intake	13	6	1	4	0	0	2	7	6	7	6
carrying	20	1	10	0	0	0	9	11	9	11	9
(6/90) intake	11	7	1	1	0	1	1	8	3	8	3
carrying	21	0	12	0	0	0	9	12	9	12	9
(7/90) intake	6	3	1	1	0	0	1	4	2	4	2
carrying	9	0	6	0	0	0	3	6	3	6	3
(8/90) intake	12	5	2	4	0	0	1	7	5	7	5
carrying	21	0	9	0	0	0	12	9	12	9	12
TOTAL	204	42	80	21	0	3	58	122	82	122	82
										0.60	0.40
AFDC Homeless											
(3/90)	39	15	0	21	0	3	0	15	24	15	24
(4/90)	58	33	0	21	0	2	2	33	25	33	25
(5/90)	56	30	2	20	0	0	4	32	24	32	24
(6/90)	40	20	3	13	0	2	2	23	17	23	17
(7/90)	52	25	0	21	0	1	5	25	27	25	27
(8/90)	72	31	0	38	0	1	2	31	41	31	41
TOTAL	317	154	5	134	0	9	15	159	158	159	158
										0.50	0.50
GA											
(3/90)	0	0	0	0	0	0	0	0	0	0	0
(4/90)	6	2	2	0	0	0	2	4	2	4	2
(5/90)	8	2	2	0	0	0	4	4	4	4	4
(6/90)	13	4	3	0	0	0	6	7	6	7	6
(7/90)	10	4	2	2	0	0	2	6	4	6	4
(8/90)	15	1	4	1	0	0	9	5	10	5	10
TOTAL	52	13	13	3	0	0	23	26	26	26	26
										0.50	0.50
NAFS											
(3/90)	3	1	0	0	0	1	1	1	2	1	2
(4/90)	0	0	0	0	0	0	0	0	0	0	0
(5/90)	5	0	1	0	0	0	4	1	4	1	4
(6/90)	4	0	0	2	0	0	2	0	4	0	4
(7/90)	3	0	1	1	0	0	1	1	2	1	2
(8/90)	4	2	0	0	0	0	2	2	2	2	2
TOTAL	19	3	2	3	0	1	10	5	14	5	14
										0.26	0.74

ETHNICITY	PRIMARY LANGUAGE	ZIP	REFERRAL DATE	REFERRAL TYPE	REFERRAL REASON CRITERIA	WKR. #	EW PHONE #
old 092	blank	94115	08-22-90	INTAKE	#11	M459	6317
	blank	94102	08-17-90	HOMELESS	#2	M341	5363
Black	English	94101	08-24-90	HOMELESS/P	#4	M354	5357
old 092	English	94124	08-15-90	INTAKE		M441	5466
blank	English	94112	08-29-90	HOMELESS	#4	M241	5347
old 092	English	blank	08-22-90	GA	#1 & #2	P365	1122
blank	blank	94109	08-14-90	HOMELESS	#4	M391	5306
old 092	blank	94102	08-29-90	HOMELESS	#4	M391	5306
			08-29-90	HOMELESS		M318	5329
old 092	English	blank	08-17-90	HOMELESS	VI - #4	M321	5327
old 092	blank	blank	08-22-90	HOMELESS	#11	M361	5339
old 092	English	94124	08-27-90	HOMELESS/T	VI - #6	M321	5327
old 092	English	94117	07-25-90	CARRYING	#11	M321	5327
old 092	English	94112	08-20-90	GA	#4	P346	1050
old 092	English	blank	08-30-90	HOMELESS	#4	M452	6318
old 092	English	94115	08-23-90	INTAKE	#1	M441	5466
Black	English	94103	08-30-90	HOMELESS	#4	M342	5365
				GA		P425	1115
	English	94132	08-13-90	HOMELESS	#1 & #2	M315	5333
	English	94107	08-09-90	HOMELESS	#4	M392	5308
old 092	English	94112	08-10-90	HOMELESS	IV - #4	M324	5324
old 092	English	94107	08-07-90	NAFS	#6	Q123	1039
Black	English	94103	08-23-90	CARRYING	#5	M262	5528
old 092	English	blank	08-14-90	HOMELESS	#3	M324	5324
old 092	English	94102	08-21-90	HOMELESS	#4	M322	
old 092	English	94115	08-29-90	CARRYING	#4	M323	5325
Black	English	blank	08-24-90	HOMELESS/P		M323	5325
White	English	94109	08-16-90	CARRYING	#11	M323	5325
old 092	blank	94110	08-02-90	HOMELESS	#1	M323	5325
Black	English	94602	08-15-90	HOMELESS	#4	M323	5325
Black	English	94124	08-17-90	HOMELESS/T	#5 & #4	M363	5341
old 092	English	94103	08-03-90	HOMELESS	VI - #4	M393	5309
old 092	Spanish	94112	08-13-90	INTAKE	#1 & #11	M422	5481
old 092	English	94115	08-22-90	HOMELESS/T	#4	blank	blank

ATTACHMENT B

ETHNICITY	PRIMARY LANGUAGE	ZIP	REFERRAL DATE	REFERRAL TYPE	REFERRAL REASON CRITERIA	WKR. #	EW PHONE #
old 092	blank	94102	08-03-90	INTAKE	#11	M441	5466
old 092	English	94124	08-22-90	HOMELESS	#4	M343	5361
old 092	English	94112	08-15-90	GA	#4 & #5	P428	1116
old 092	English	94124	no date	HOMELESS	#4 & #5	M344	5367
old 092	English	94132	08-03-90	HOMELESS		M324	5324
old 092	English	blank	08-17-90	HOMELESS	#4 & #11	M433	5457
	blank	blank	08-03-90	GA	#4	P443	1220
old 092	English	94110	08-23-90	CARRYING	#11	M344	5367
old 092	English	94124	08-08-90	CARRY./PAFS	#4	M314	6286
old 092	blank	94115	08-13-90	GA	#4 & #5	P350	1093
old 092	English	94122	08-02-90	NAFS	#4 & #11	Q124	1044
old 092	English	blank	08-08-90	GA	#4	P423	1130
old 092	English	94124	08-21-90	HOMELESS	#4	M344	5367
old 092	English	94102	08-29-90	HOMELESS	A - #3	M344	5367
Black	English	blank	08-28-90	HOMELESS	#4	M445	5462
blank	English	94102	08-29-90	INTAKE	#4	M421	5479
old 092	Russian	blank	08-15-90	HOMELESS	#4	K422	6091
old 092	English	94112	08-08-90	HOMELESS	VI - #2 & #4	M315	5335
old 092	English	94102	08-29-90	CARRYING	#11	M353	5359
Chinese	Cantonese	blank	08-15-90	CARRYING	#4	K413	5745
old 092	English	blank	08-15-90	GA	#4	P374	1099
			08-20-90	CARRYING		K417	5749
Black	English	94124	08-28-90	HOMELESS/T	#4	M354	5357
Black	English	94101	08-16-90	HOMELESS	#7	M323	5325
old 092	English	94109	08-06-90	HOMELESS	#1	M364	5337
old 092	English	94117	08-30-90	HOMELESS	#7	M347	5362
Black	English	blank	08-16-90	HOMELESS/T	#2	M445	4528
old 092	blank	blank	08-30-90	HOMELESS	#4	M431	5453
Black	English	94115	08-15-90	HOMELESS/P	V - #11 & VI - #4	M364	5337
old 092	English	94115	08-29-90	CARRYING	#4	M364	5337
blank	English	94115	08-07-90	CARRYING	#3, #5, #11	M354	5357

ETHNICITY	PRIMARY LANGUAGE	ZIP	REFERRAL DATE	REFERRAL TYPE	REFERRAL REASON CRITERIA	WKR. #	EW PHONE #
old 092	English	blank	08-24-90	GA	#1 & #2	P377	blank
old 092	English	94110	07-20-90	GA	#1 & #4	P374	1099
Black	English	94124	08-21-90	HOMELESS/T		M354	5357
Black	English	94124	08-30-90	HOMELESS	#4	M354	5357
blank	blank	94112	08-10-90	INTAKE	#4	M445	5462
White	English	94110	08-31-90	CARRYING	#11	M364	5337
old 092	English	94110	08-21-90	NAFS	#6	Q111	1076
old 092	English	94107	08-01-90	HOMELESS	#2	M364	5337
White	English	94124	no date	HOMELESS/T	#4	M354	5357
old 092	blank	94124	08-10-90	HOMELESS	#3 & #4	M431	5453
Hispanic	English	94110	08-08-90	HOMELESS		M235	5295
		94110					
old 092	English	94117	08-24-90	CARRYING	#11	M395	5307
old 092	Russian	94127	08-21-90	INTAKE	#11	K423	5456
blank	English	94132	08-30-90	HOMELESS	#4	M326	5320
old 092	blank	94132	08-31-90	HOMELESS	#4	M326	5320
old 092	English	blank	08-06-90	CARRYING	#11	M345	5366
Black	English	94134	08-10-90	HOMELESS/T	#4	M235	5295
old 092	English	94107	08-28-90	HOMELESS	#VI - #4	M318	5329
old 092	Spanish	94102	08-09-90	GA	#4 & #5	P437	1258
old 092	English	blank	08-29-90	HOMELESS	#4	M345	5366
old 092	blank	94110	08-21-90	HOMELESS	#4	M345	5366
old 092	English	94124	08-03-90	INTAKE	#5	M425	5428
old 092	English	blank	08-22-90	HOMELESS/T	#4	M326	5320
old 092	English	94110	07-30-90	GA		P374	1099
old 092	blank	94109	08-06-90	HOMELESS/T	#4	M346	5364
old 092	English	94124	08-07-90	HOMELESS	#11	M346	5364
Black	English	94124	08-16-90	CARRYING		M346	5364
Black	English	94124	08-27-90	HOMELESS/T	#4	M396	5305
Chinese	Chinese	94109	08-14-90	CARRYING	#11	K413	5745
blank	English	blank	08-24-90	HOMELESS	#4	M357	5354
old 092	English	94124	08-21-90	HOMELESS	#4	M326	5320
old 092	English	94124	08-30-90	HOMELESS	#4	M326	5320
old 092	English	blank	08-01-90	HOMELESS/P	#4	M346	5364

ETHNICITY	PRIMARY LANGUAGE	ZIP	REFERRAL DATE	REFERRAL TYPE	REFERRAL REASON CRITERIA	WKR. #	EW PHONE #
blank	blank	94115	08-10-90	HOMELESS/P		M346	5364
blank	English	94102	no date	CARRYING	#11	E351	6296
old 092	English	94124	08-09-90	NAFS	#4	Q122	1061
old 092	English	94115	08-10-90	HOMELESS	#4	M346	5364
old 092	English	94110	08-15-90	HOMELESS	#4	M366	5343
old 092	English	94133	08-30-90	INTAKE	#11	M422	5481
Black	English	94124	08-27-90	HOMELESS		M366	5343
Black	English	94124	08-23-90	HOMELESS/T	#4	M445	5462
old 092	English	94115	08-27-90	GA		P355	1100
old 092	English	94109	07-30-90	GA	#4 & #5	P336	1073
old 092	English	94134	08-14-90	HOMELESS	#5	M319	5557
old 092	English	94134	08-09-90	CARRYING	#11	M347	5362
old 092	English	94102	08-23-90	GA	#5	P418	1140
old 092	English	94115	08-10-90	HOMELESS	#4	M347	5362
old 092	English	94110	08-08-90	HOMELESS		M319	5557
old 092	English	94110	08-03-90	HOMELESS	#4	M324	5324
old 092	English	94117	08-01-90	HOMELESS	#4	M347	5362
Black	English	94112	08-13-90	CARRYING		M266	5521
blank	English	blank	08-23-90	HOMELESS/T	#5	M357	5354
blank	English	blank	08-27-90	HOMELESS		M357	5354
			08-28-90	CARRYING	#11	M397	5304
old 092	English	blank	08-03-90	INTAKE	#4	M425	5428
Black	English	blank	08-02-90	HOMELESS/T	#4	M445	5462
Chinese	Chinese	94110	08-27-90	CARRYING	#11	K413	5747
blank	blank	blank	08-10-90	HOMELESS	VI - #4	M246	5349
blank	Russian	94116	08-21-90	INTAKE	#11	K429	5184

REFERRAL RECEIVED	FRED WORKER	RESULTS OF FIELD FINDINGS	REASON
08-06-90	7-Stepney	Denied	moved out of County
08-22-90	2-Ho	Denied	not homeless
08-17-90	7-Stepney	Discontinued	failure to cooperate
08-24-90	2-Ho	Denied	not homeless
08-03-90	1-Calloway	Denied	fake eviction notice
08-20-90	1-Calloway	Denied	no eligible children
08-03-90	5-Pittman 6-Snyder	Granted	separate H/H
08-23-90	7-Stepney	Continued	residence verified
08-09-90	5-Pittman	Continued	residence verified
08-14-90	7-Stepney	Discontinued	whereabouts unknown
08-03-90	7-Stepney	Granted	separate H/H
08-10-90	2-Ho	Denied	failure to cooperate
08-21-90	8-Wong	Granted	homeless
08-29-90	8-Wong	Granted	
08-28-90	2-Ho	Withdrawn	not homeless
08-30-90	5-Pittman	Continued	residence verified
08-15-90	5-Pittman	Granted	homeless
08-08-90	4-Nguyen	Granted	
08-30-90	8-Wong	Discontinued	no eligible children
08-17-90	2-Ho	Continued	has children
08-17-90	8-Wong	Continued	not on aid in another State
08-21-90	2-Ho	Discontinued	whereabouts unknown
08-28-90	4-Nguyen	Denied	living w/friend long term
08-16-90	8-Wong	Granted	homeless
08-06-90	3-Medina	Granted	P/H verified w/mngr.
08-30-90	7-Stepney	Granted	homeless
08-16-90	7-Stepney	Denied	not homeless
08-30-90	2-Ho	Denied	whereabouts unknown
08-15-90	3-Medina	Granted	residence verified
08-29-90	3-Medina	Continued	whereabouts established
08-07-90	3-Medina	Discontinued	whereabouts unknown

AUGUST 1990 FRED DATA/STATS [ISOLATED FIELDS] 10-OCT-1990;09:29:41 AM

REFERRAL RECEIVED	FRED WORKER	RESULTS OF FIELD FINDINGS	REASON
08-23-90	6-Snyder	Denied	whereabouts unknown
08-17-90	5-Pittman	Denied	not evicted
08-24-90	5-Pittman	Granted	homeless
08-15-90	2-Ho	Granted	address verified
08-30-90	6-Snyder	Denied	not evicted
08-23-90	5-Pittman	Discontinued	whereabouts unknown
08-14-90	1-Calloway	Discontinued	whereabouts unknown
08-30-90	1-Calloway	Granted	residence verified
08-30-90	5-Pittman	Granted	homeless
08-17-90	4-Nguyen	Denied	not evicted
08-22-90	5-Pittman	Denied	not homeless
08-27-90	3-Medina	Granted	
08-03-90	3-Medina	Discontinued	child not with client
08-20-90	2-Ho	Continued	does not have business
08-30-90	2-Ho	Denied	whereabouts unknown
08-23-90	4-Nguyen	Granted	residence verified
08-30-90	4-Nguyen	Denied	not evicted
08-13-90	2-Ho	Discontinued	live out of S.F. County
08-13-90	5-Pittman	Denied	not evicted
08-10-90	4-Nguyen	Granted	homeless
08-10-90	4-Nguyen	Granted	
08-10-90	5-Pittman	Granted	separate H/H
08-23-90	7-Stepney	Discontinued	whereabouts unknown
08-14-90	4-Nguyen	Denied	not homeless
08-21-90	4-Nguyen	Granted	homeless
08-30-90	3-Medina	Continued	whereabouts of children known
08-24-90	4-Nguyen	Denied	invalid rental agreement
08-15-90	6-Snyder	Continued	approved request for furniture
08-02-90	1-Calloway	Denied	whereabouts unknown
08-15-90	1-Calloway	Denied	amount of rent exceeds limit for needs for 2 people
08-17-90	3-Medina	Denied	not evicted
08-03-90	4-Nguyen	Denied	voluntarily moved-out
08-13-90	3-Medina	Granted	rent verified/father absent
08-22-90	4-Nguyen	Granted	homeless

REFERRAL RECEIVED	FRED WORKER	RESULTS OF FIELD FINDINGS	REASON
08-10-90	6-Snyder	Granted	
08-01-90	7-Stepney	Discontinued	failure to cooperate
08-13-90	1-Calloway	Discontinued	failed to provide essential info.
08-13-90	3-Medina	Granted	homeless
08-15-90	4-Nguyen	Granted	homeless
08-30-90	8-Wong	Granted	A/P left the home
08-27-90	1-Calloway	Denied	has not moved
08-23-90	5-Pittman	Denied	not eligible in S.F. County
08-28-90	6-Snyder	Discontinued	whereabouts unknown
08-03-90	4-Nguyen	Discontinued	false Social Security number
08-14-90	2-Ho	Denied	not evicted/voluntarily moved
08-10-90	6-Snyder	Discontinued	A/F is in home
08-24-90	6-Snyder	Discontinued	working/unreported earnings
08-21-90	5-Pittman	Denied	not evicted
08-08-90	2-Ho	Granted	
08-03-90	7-Stepney	Granted	
08-03-90	5-Pittman	Granted	homeless
08-13-90	6-Snyder	Continued	
08-23-90	2-Ho	Denied	not homeless
08-27-90	6-Snyder	Granted	homeless
08-28-90	8-Wong		
08-03-90	1-Calloway	Denied	fake rental agreement
08-06-90	6-Snyder	Denied	claimant in jail
08-28-90	8-Wong	Discontinued	no eligible children
08-13-90	4-Nguyen	Granted	homeless
08-22-90	8-Wong	Continued	separate H/H

REFERRAL RECEIVED	FRED WORKER	RESULTS OF FIELD FINDINGS	REASON
08-28-90	7-Stepney	Discontinued	whereabouts unknown
08-03-90	3-Medina	Continued	identity identified
08-22-90	1-Calloway	Denied	whereabouts unknown
08-30-90	3-Medina	Granted	homeless
08-10-90	5-Pittman	Denied	residency requirements not met
08-31-90	6-Snyder	Discontinued	unreported resources
08-23-90	8-Wong	Discontinued	does not live at 1150 Florida St.
08-01-90	4-Nguyen	Denied	no such address
		Granted	
08-22-90	7-Stepney	Denied	whereabouts unknown
08-10-90	3-Medina	Denied	whereabouts unknown
08-08-90	2-Ho	Granted	has Perm. Housing
08-24-90	7-Stepney	Discontinued	whereabouts unknown
08-22-90	6-Snyder	Granted	residence verified
08-30-90	4-Nguyen	Denied	not evicted
08-31-90	5-Pittman	Denied	not homeless
08-06-90	6-Snyder	Discontinued	whereabouts unknown
08-10-90	2-Ho	Denied	voluntarily moved-out
08-28-90	6-Snyder	Granted	homeless
08-10-90	3-Medina	Continued	whereabouts & H/H comp. verified
08-30-90	7-Stepney	Granted	homeless
08-21-90	3-Medina	Denied	whereabouts unknown
08-03-90	2-Ho	Discontinued	whereabouts unknown
08-22-90	3-Medina	Granted	statements/whereabouts verified
08-03-90	2-Ho	Discontinued	A/F is in home
08-06-90	5-Pittman	Granted	spousal abuse
08-07-90	1-Calloway	Discontinued	no eligible children
08-17-90	1-Calloway	Continued	residence verified
08-27-90	3-Medina	Granted	homeless
08-14-90	8-Wong	Discontinued	excess earnings (working)
08-24-90	1-Calloway	Denied	fake eviction notice
08-21-90	6-Snyder	Denied	whereabouts unknown
08-30-90	6-Snyder	Denied	whereabouts unknown
08-01-90	2-Ho	Denied	not evicted

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED
08/08	yes	old 092	old 092	no	old 092	2:00
08/23	yes	old 092	old 092	no	old 092	1:00
08/24	yes	old 092	old 092	no	old 092	1:30
09/11 & 13	no	old 092	old 092	no	old 092	1:00
08/07	no	old 092	old 092	no	old 092	2:00
08/24	yes	old 092	old 092	yes	old 092	1:30
08/10	no			no	old 092	1:00
blank	blank	old 092	old 092	blank	old 092	blank
08/14, 15 & 08/16, 20	no	old 092	old 092	no	old 092	5:00
08/20,23,24 08/27 & 29	yes	old 092	old 092	no	old 092	4:30
08/14 & 22	no	old 092	old 092	no	old 092	3:00
08/15 & 20	no	old 092	old 092	no	old 092	1:00
yes/no date	no	old 092	old 092	no	old 092	1:00
08/24,29 & 09/04 & 18	yes	old 092	old 092	no	old 092	6:00
08/29	no	no	yes	no	NO	1:00
08/30&09/04	no	old 092	old 092	no	old 092	3:00
08/17 & 24	no	old 092	old 092	no	old 092	3:00
08/10	blank	old 092	old 092	blank	old 092	1:00
09/11	yes	old 092	old 092	blank	old 092	2:00
08/22	no	blank	yes	no	NO	1:00
no	no	old 092	old 092	no	old 092	1:00
08/29	no	no	yes	no	NO	1:00
08/21	no	no	yes	no	NO	3:00
08/08	no	old 092	old 092	no	old 092	blank
blank	blank	old 092	old 092	blank	old 092	blank
08/20	blank	yes	yes	no	NO	1:30
09/04,06,07 & 09/13	no	old 092	old 092	no	old 092	2:00
08/16 & 17	no	blank	yes	no	NO	2:30
no	blank	old 092	old 092	blank	old 092	2:00
07/13	yes/mail	blank	yes	yes	YES	2:00

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED
08/28 & 29	yes/mail	old 092	old 092	no	old 092	2:30
08/27	blank	blank	blank	blank	blank	2:00
08/20	no	old 092	old 092	no	old 092	1:00
08/30	yes	no	yes	no	NO	2:00
09/04	yes	old 092	old 092	blank	old 092	1:00
yes/no date	yes	no	yes	no	NO	2:00
08/30	yes	old 092	old 092	no	old 092	1:00
08/20 & 22	no	old 092	old 092	no	old 092	2:00
08/22	yes	old 092	old 092	no	old 092	2:00
08/28	no	old 092	old 092	no	old 092	1:30
08/08	no	old 092	old 092	no	old 092	1:30
08/22	no	old 092	old 092	no	old 092	1:00
08/31	yes	old 092	old 092	no	old 092	1:00
08/27&09/07	yes	old 092	old 092	no	old 092	2:00
no	no	no	no	no	NO	0:30
08/13	no	old 092	old 092	no	YES-08/10	1:00
no	no	old 092	old 092	no	old 092	1:00
08/24 & 27	yes	blank	yes	no	NO	2:00
08/15 & 17	no	old 092	old 092	no	old 092	2:00
08/22	no	old 092	old 092	no	old 092	1:00
09/10 & 11	yes/mail	old 092	old 092	blank	old 092	4:00
no	no	no	yes	no	NO	0:30
08/21	blank	blank	blank	blank	blank	1:30
no	blank	old 092	old 092	blank	old 092	blank
no	yes	blank	yes	no	blank	3:00
no	yes/mail	blank	no	no	NO	0:30
	no	old 092	old 092	no	old 092	0:30
08/15	no	old 092	old 092	no	old 092	1:30
08/24	no	old 092	old 092	no	old 092	blank

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED
no	no	no	yes	no	NO	1:00
08/06 & 08	yes	old 092	old 092	no	old 092	2:00
08/17	yes	old 092	old 092	no	old 092	1:00
08/14	no	old 092	old 092	no	old 092	2:30
09/06	yes	old 092	old 092	no	old 092	1:00
08/29	no	blank	yes	yes	NO	1:00
08/24 & 27	yes	blank	yes	blank	blank	3:00
09/06 & 13	yes/mail	old 092	old 092	no	old 092	2:30
08/07	no	old 092	old 092	no	old 092	3:00
08/15	no	old 092	old 092	no	old 092	1:00
08/14	yes/mail	old 092	old 092	no	old 092	2:00
08/27	yes/mail	old 092	old 092	yes	old 092	1:30
no	yes	old 092	old 092	blank	old 092	1:00
08/15	no	old 092	old 092	no	old 092	2:30
08/06,08,15	no	old 092	old 092	no	old 092	2:30
08/03	no	old 092	old 092	blank	old 092	blank
09/05,07,10	yes/mail	blank	blank	no	NO	2:30
08/24	no	no	yes	no	NO	1:00
08/30	yes	blank	no	no	NO	blank
no	no	old 092	old 092	no	old 092	1:00
08/07	no	blank	no	no	NO	2:00
08/30	yes	no	no	no	NO	2:00
08/27	yes	no	yes	no	NO	1:00

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED
09/05,06,07	yes	old 092	old 092	no	old 092	1:30
08/08	no	old 092	old 092	no	old 092	1:30
no	yes	no	yes	no	blank	0:30
08/30	no	blank	yes	no	YES	2:00
08/14	yes	no	yes	no	NO	2:00
no	yes/mail	blank	no	blank	NO	2:00
08/28	yes	old 092	old 092	no	old 092	1:00
08/01	no	old 092	old 092	no	old 092	1:00
08/03	no			blank		blank
08/23,24,28	yes	blank	yes	no	NO	4:00
08/13	yes	old 092	old 092	no	old 092	2:00
08/09	no	no	yes	no	NO	blank
08/30	yes	old 092	old 092	no	old 092	1:30
08/27 & 28	yes	old 092	old 092	no	old 092	3:00
no	no	old 092	old 092	no	old 092	0:30
no	yes	old 092	old 092	no	old 092	1:00
08/09	no	old 092	old 092	no	old 092	1:30
08/14	no	blank	yes	blank	NO	
08/29&09/05	yes	old 092	old 092	no	old 092	3:00
08/10	no	old 092	old 092	no	old 092	1:30
08/30	no	old 092	old 092	no	old 092	1:30
08/22 & 23	yes/mail	old 092	old 092	blank	old 092	2:30
08/08 & 10	no	old 092	old 092	no	old 092	1:00
08/23	no	old 092	old 092	no	old 092	2:00
08/08	no	old 092	old 092	no	old 092	blank
no	blank	old 092	old 092	blank	old 092	1:00
no	no	old 092	old 092	no	old 092	0:15
08/29	yes	blank	no	no	NO	1:30
08/28	no	blank	no	no	NO	2:00
08/20	yes	no	yes	yes	NO	6:00
08/27	yes	yes	yes	no	NO	1:00
08/22	yes/mail	old 092	old 092	no	old 092	1:00
08/31	yes	old 092	old 092	no	old 092	08/31
08/02	no	old 092	old 092	no	old 092	1:00

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED	DIC
08/08	yes	old 092	old 092	no	old 092	2:00	08/08
08/23	yes	old 092	old 092	no	old 092	1:00	08/23
08/24	yes	old 092	old 092	no	old 092	1:30	08/24
09/11 & 13	no	old 092	old 092	no	old 092	1:00	09/13
08/07	no	old 092	old 092	no	old 092	2:00	08/07
08/24	yes	old 092	old 092	yes	old 092	1:30	08/24
08/10	no			no	old 092	1:00	08/10
blank	blank	old 092	old 092	blank	old 092	blank	blank
08/14, 15 & 08/16, 20	no	old 092	old 092	no	old 092	5:00	08/20
08/20,23,24 08/27 & 29	yes	old 092	old 092	no	old 092	4:30	08/29
08/14 & 22	no	old 092	old 092	no	old 092	3:00	08/22
08/15 & 20	no	old 092	old 092	no	old 092	1:00	08/21
yes/no date	no	old 092	old 092	no	old 092	1:00	blank
08/24,29 & 09/04 & 18	yes	old 092	old 092	no	old 092	6:00	09/20
08/29	no	no	yes	no	NO	1:00	08/29
08/30&09/04	no	old 092	old 092	no	old 092	3:00	09/05
08/17 & 24	no	old 092	old 092	no	old 092	3:00	08/24
08/10	blank	old 092	old 092	blank	old 092	1:00	08/10
09/11	yes	old 092	old 092	blank	old 092	2:00	09/21
08/22	no	blank	yes	no	NO	1:00	08/23
no	no	old 092	old 092	no	old 092	1:00	08/27
08/29	no	no	yes	no	NO	1:00	08/31
08/21	no	no	yes	no	NO	3:00	08/21
08/08	no	old 092	old 092	no	old 092	blank	08/08
blank	blank	old 092	old 092	blank	old 092	blank	blank
08/20	blank	yes	yes	no	NO	1:30	08/20
09/04,06,07 & 09/13	no	old 092	old 092	no	old 092	2:00	09/13
08/16 & 17	no	blank	yes	no	NO	2:30	08/20
no	blank	old 092	old 092	blank	old 092	2:00	08/29
07/13	yes/mail	blank	yes	yes	YES	2:00	07/13

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED	DIC
08/28 & 29	yes/mail	old 092	old 092	no	old 092	2:30	08/29
08/27	blank	blank	blank	blank	blank	2:00	08/29
08/20	no	old 092	old 092	no	old 092	1:00	08/20
08/30	yes	no	yes	no	NO	2:00	08/30
09/04	yes	old 092	old 092	blank	old 092	1:00	09/04
yes/no date	yes	no	yes	no	NO	2:00	08/21
08/30	yes	old 092	old 092	no	old 092	1:00	08/30
08/20 & 22	no	old 092	old 092	no	old 092	2:00	08/22
08/22	yes	old 092	old 092	no	old 092	2:00	08/22
08/28	no	old 092	old 092	no	old 092	1:30	08/28
08/08	no	old 092	old 092	no	old 092	1:30	08/08
08/22	no	old 092	old 092	no	old 092	1:00	08/23
08/31	yes	old 092	old 092	no	old 092	1:00	09/04
08/27&09/07	yes	old 092	old 092	no	old 092	2:00	09/07
no	no	no	no	no	NO	0:30	08/30
08/13	no	old 092	old 092	no	YES-08/10	1:00	08/13
no	no	old 092	old 092	no	old 092	1:00	08/13
08/24 & 27	yes	blank	yes	no	NO	2:00	08/29
08/15 & 17	no	old 092	old 092	no	old 092	2:00	08/17
08/22	no	old 092	old 092	no	old 092	1:00	08/22
09/10 & 11	yes/mail	old 092	old 092	blank	old 092	4:00	09/21
no	no	no	yes	no	NO	0:30	08/24
08/21	blank	blank	blank	blank	blank	1:30	08/20
no	blank	old 092	old 092	blank	old 092	blank	08/08
no	yes	blank	yes	no	blank	3:00	08/17
no	yes/mail	blank	no	no	NO	0:30	08/17
	no	old 092	old 092	no	old 092	0:30	08/06
08/15	no	old 092	old 092	no	old 092	1:30	08/20
08/24	no	old 092	old 092	no	old 092	blank	08/24

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED	DIC
no	no	no	yes	no	NO	1:00	08/10
08/06 & 08	yes	old 092	old 092	no	old 092	2:00	08/08
08/17	yes	old 092	old 092	no	old 092	1:00	08/21
08/14	no	old 092	old 092	no	old 092	2:30	08/15
09/06	yes	old 092	old 092	no	old 092	1:00	09/06
08/29	no	blank	yes	yes	NO	1:00	pending
08/24 & 27	yes	blank	yes	blank	blank	3:00	08/29
09/06 & 13	yes/mail	old 092	old 092	no	old 092	2:30	09/25
08/07	no	old 092	old 092	no	old 092	3:00	08/14
08/15	no	old 092	old 092	no	old 092	1:00	08/16
08/14	yes/mail	old 092	old 092	no	old 092	2:00	08/14
08/27	yes/mail	old 092	old 092	yes	old 092	1:30	08/27
no	yes	old 092	old 092	blank	old 092	1:00	08/10
08/15	no	old 092	old 092	no	old 092	2:30	08/15
08/06,08,15	no	old 092	old 092	no	old 092	2:30	08/15
08/03	no	old 092	old 092	blank	old 092	blank	08/03
09/05,07,10	yes/mail	blank	blank	no	NO	2:30	09/10
08/24	no	no	yes	no	NO	1:00	08/24
08/30	yes	blank	no	no	NO	blank	09/05
no	no	old 092	old 092	no	old 092	1:00	08/03
08/07	no	blank	no	no	NO	2:00	08/07
08/30	yes	no	no	no	NO	2:00	09/04
08/27	yes	no	yes	no	NO	1:00	08/27

HOME VISIT	COMPLAINT FORM GIVEN	COMPLAINT FILE	CONSENT ON FILE	SIU REFERRAL	SERVICE REFERRAL	HOURS WORKED	DIC
09/05,06,07	yes	old 092	old 092	no	old 092	1:30	09/07
08/08	no	old 092	old 092	no	old 092	1:30	08/09
no	yes	no	yes	no	blank	0:30	08/24
08/30	no	blank	yes	no	YES	2:00	08/30
08/14	yes	no	yes	no	NO	2:00	08/14
no	yes/mail	blank	no	blank	NO	2:00	09/10
08/28	yes	old 092	old 092	no	old 092	1:00	08/30
08/01	no	old 092	old 092	no	old 092	1:00	08/01
08/03	no			blank		blank	08/03
08/23,24,28	yes	blank	yes	no	NO	4:00	08/30
08/13	yes	old 092	old 092	no	old 092	2:00	08/15
08/09	no	no	yes	no	NO	blank	08/09
08/30	yes	old 092	old 092	no	old 092	1:30	09/05
08/27 & 28	yes	old 092	old 092	no	old 092	3:00	08/28
no	no	old 092	old 092	no	old 092	0:30	08/30
no	yes	old 092	old 092	no	old 092	1:00	08/31
08/09	no	old 092	old 092	no	old 092	1:30	08/09
08/14	no	blank	yes	blank	NO		08/17
08/29&09/05	yes	old 092	old 092	no	old 092	3:00	09/05
08/10	no	old 092	old 092	no	old 092	1:30	08/10
08/30	no	old 092	old 092	no	old 092	1:30	08/30
08/22 & 23	yes/mail	old 092	old 092	blank	old 092	2:30	08/23
08/08 & 10	no	old 092	old 092	no	old 092	1:00	08/10
08/23	no	old 092	old 092	no	old 092	2:00	08/23
08/08	no	old 092	old 092	no	old 092	blank	08/08
no	blank	old 092	old 092	blank	old 092	1:00	08/06
no	no	old 092	old 092	no	old 092	0:15	08/08
08/29	yes	blank	no	no	NO	1:30	08/29
08/28	no	blank	no	no	NO	2:00	08/28
08/20	yes	no	yes	yes	NO	6:00	09/19
08/27	yes	yes	yes	no	NO	1:00	08/27
08/22	yes/mail	old 092	old 092	no	old 092	1:00	08/22
08/31	yes	old 092	old 092	no	old 092	08/31	
08/02	no	old 092	old 092	no	old 092	1:00	08/03

CITY AND COUNTY OF SAN FRAN[illegible] 'RTMENT OF SOCIAL SERVICES

RECEIVED
AUG 8 1990

FRED REFERRAL

Referral Date 08/08/90

FRED

Section I: To be completed by line staff

Type of Referral:

☐ AFDC ☐ PAFS ☒ AFDC HOMELESS ☐ GA ☐ NAFS ☐ MEDI-CAL

Case Name Case Number Client's SS# —

(Payee, if different) — Primary Language E

Address & Apt # ? 94110

List all persons living in the home SSI GRANDMOTHER

Client's Home Phone Work Phone — Message Phone —

EW's Name — Wkr. # M319 Phone # 5557

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts.

(1) Grandmother requested her to leave the home - EW unable to contact grandmother, no one answered
(2) Clt. refuses to give info on location/current situ

9/23

EW Signature J. Garcia EW Supervisor Signature Strickler

Section II: To be completed by FRED staff

Date Case Received @ 9:35 a.m. Assigned to Bode, Snyder on 8/8/90 @ 9[illegible]

Field Findings: [redacted] applied for homeless on 8/8/9[illegible] She had been living ~~at~~ at [redacted] St. but has been evicted by [redacted] (Clothes on TIME). Call to [redacted] confirmed this. [redacted] has no address but will call me 8-9-90 - HV to [redacted] SF. [redacted] her cousin share house. Sleeping arrangements & belongings were seen. [redacted] n't stay much longer. The house has pensaldt.

Recommendation: Approve temp. homeless. CH is staying at but can't stay there perm.

HV Made ☒ Yes ☐ No Date HV Made 8-15-90 Date Investigation Completed 8-15-90

HRS. Worked 2 1/2 Collateral Contacts Made? ☒ Yes ☐ No If YES, enter names of persons contacted grandmother

Complaint form given? ☒ Yes ☐ No SIU referral made ☐ Yes ☒ No

Section III: To be completed by line staff and returned to FRED Unit.

STATISTICS AND DISPOSITION

Case Number

CITY AND COUNTY OF SAN FRAN. RECEIVED AUG 10 1990 — RTMENT OF SOCIAL SERVICES

FRED REFERRAL

ATTACHMENT C

Referral Date 8-10-90

FRED Section I: To be completed by line staff

Type of Referral:

☐ AFDC ☐ PAFS ☑ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

Case Name [redacted] [redacted] Case Number Client's SS#

(Payee, if different) _____ Ethnicity _____ Primary Language _____

Address & Apt # [redacted] [redacted] [redacted] ZIP 94115

List all persons living in the home Client & her 2 children & her mother (

Client's Home Phone] Work Phone _____ Message Phone _____

EW's Name Bernette Hooker Wkr. # M3246 Phone # X 53164

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements.

Received a call from the [redacted] stating that [redacted] new name, new mail, knows the new out of care, knows. The housing authority has an apartment to give to the client. Client need permanent, homeless assistance. Referred for [illegible] case [illegible] client's stage.

EW Signature B. Hooker EW Supervisor Signature [illegible]

Section II: To be completed by FRED staff

Date Case Received 8/10/90 11:35 a.m. Assigned to [redacted] on 8/10/90

Referral criteria #'s met: _____

Field Findings: I called [redacted] on 8/10/90. She verified that [redacted] does have a apt ready. Total move in cost for clt is $340.00 Rent is $300.00 and Sec. dep. is $170.00. A letter of verification is on file from [redacted] (clt has been homeless + living temporarily w/ friends)

Results of Field Findings: Approve Perm. Housing. Clt. is eligible for $170.00 Sec. dep.

HV Made ☐ Yes ☑ No Date HV Made NA Date Investigation Completed 8-10-9

HRS. Worked / Collateral Contacts Made? ☑ Yes ☐ No If YES. enter names of persons contacted [redacted]

Complaint form ~~given~~ mailed? ☑ Y ☐ N Complaint file ☐ Y ☑ N SIU Referral made ☐ Y ☑

Consent form on file ☑ Yes ☐ No Service referral made ☐ Yes ☑ No

CITY AND COUNTY OF SAN FRANCISCO

RECEIVED
AUG 3 1990

DEPARTMENT OF SOCIAL SERVICES

FRED REFERRAL

Referral Date 7/30/90

Type of Referral: FRED

Section I: To be completed by line staff

☐ AFDC ☐ PAFS ☐ AFDC HOMELESS ☒ GA ☐ NAFS ☐ MEDI-CAL

Case Name _____ Case Number [redacted] Client's SS# _____

(Payee, if different) _____ Primary Language English

Address & Apt # _____ St. SF CA ZIP 94110

List all persons living in the home 3

Client's Home Phone _____ Work Phone _____ Message Phone _____

EW's Name Cindy Mcguiddan Wkr. # P374 Phone # 558-1094

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts.

Client states she lives with her son's grandmother the Mother of Client's son's Father who lives in a Flat in Bl[illegible] Enfield Client is ineligible for AFDC; Alfonso Pablo 557-5521.

EW Signature Cindy Mcguiddan EW Supervisor Signature [signature] P370

Section II: To be completed by FRED staff

Date Case Received 2:45 p.m. Assigned to Baez, HC on 8/3/90 @ 3'

Field Findings: H/V at _____ St. Clt, the child and the child's father were home. Clt. shown her bedroom which consists a double bed and clothing including men's clothings. Clt admitted that the child father does live with her. They were on EAP before. Clt. was told that herself, her child and his father should be on the GA case together.

Recommendation: The father, Client and the child should be put on a same case as a family, otherwise circumstance case.

HV Made ☑ Yes ☐ No Date HV Made 8/8/90 Date Investigation Completed 8/8/90

HRS. Worked _____ Collateral Contacts Made? ☐ Yes ☑ No If YES, enter names of persons contacted _____

Complaint form ~~given~~? ☑ Yes ☐ No SIU referral made ☐ Yes ☑ No

mailed to Clt.

CITY AND COUNTY OF SAN [redacted] DEPARTMENT OF SOCIAL SERVICES

RECEIVED
AUG 28 1990
FRED

FRED REFERRAL

Referral Date 8-28-90

Section I: To be completed by line staff

Type of Referral:

☐ AFDC ☐ PAFS ☒ AFDC HOMELESS ☐ GA ☐ NAFS ☐ MEDI-CAL

Case Name [redacted] Case Number [redacted] Client's SS# [redacted]

(Payee, if different) [redacted] Primary Language E

Address & Apt # Previous add. [redacted] St. ZIP 94107

List all persons living in the home [redacted]

Client's Home Phone [redacted] Work Phone [redacted] Message Phone [redacted]

EW's Name Harry Traudt Wkr. # M318 Phone # 5329

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts.

VI-A: Not a legally verifiable eviction notice.

#4
#5

EW Signature E.C.T. Supervisor Signature J. Strickler

Section II: To be completed by FRED staff

Date Case Received 8/28 3:07 p.m. Assigned to Bobo, Snyder on 8/28/90@

Field Findings: HV made on 8/29/90 to [redacted]. CH claimed staying at this addr. -- w/ [redacted] No response. On I spoke w/ [redacted] (Sister of [redacted]) & C.I. verified her sister and her children had moved out over a week ago. 9-5-90 HV to [redacted] st. [redacted] and her child were seen. Sleeping arrangements and belongings were seen. Note on file from tenant at [redacted]

Recommendation: Approve Homeless HSSIS. CH. does appear to be homeless.

HV Made ☒ Yes ☐ No Date HV Made 8/29/90 9/5/90 Date Investigation Completed 9-5-

HRS. Worked 3 Collateral Contacts Made? ☒ Yes ☐ No If YES, enter name of persons contacted [redacted]

Complaint form given? ☒ Yes ☐ No SIU referral made ☐ Yes ☒ No

Section III: To be completed by line staff and returned to FRED Unit.

STATISTICS AND DISPOSITION

CITY AND COUNTY OF SAN FRANCISCO

RECEIVED

AUG 30 1990

DEPARTMENT OF SOCIAL SERVICES

FRED REFERRAL

Referral Date 8-30-90

FRED Section I: To be completed by line staff

Type of Referral:

☐ AFDC ☐ PAFS ☑ AFDC HOMELESS ☐ GA ☐ NAFS ☐ MEDI-CAL

Case Name [redacted] Case Number [redacted] Client's SS# [redacted]

(Payee, if different) _____ Primary Language English

Address & Apt # [redacted] ZIP 94124

List all persons living in the home [redacted]

Client's Home Phone none Work Phone none Message Phone none

EW's Name Alfred Silmon Wkr. # M326 Phone # 5320

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts. Client says building where she was living was torn down, due to earthquake damage.

EW Signature Alfred Silmon EW Supervisor Signature A. Pajo

Section II: To be completed by FRED staff

Date Case Received @ 1:30 P.M. Assigned to Boole, Gregory on 8/30/90@1

Field Findings: [redacted] has applied for perm. Housing but clt can't verify she has ever been homeless (see 092 dated 8-21-90). [redacted] claimed she again moved to [redacted] but never told her worker or CC Baggu her address. Records has not been torn down There was no response at that address, but the house is occupied. K. Snyder B226

Recommendation: Deny - MSI can't verify her homelessness & her whereabouts can't at this time

HV Made ☒ Yes ☐ No Date HV Made 8-31-90 Date Investigation Completed 8-31-

HRS. Worked 2 Collateral Contacts Made? ☐ Yes ☑ No If YES, enter nam

of persons contacted _____

Complaint form given? ☐ Yes ☐ No SIU referral made ☐ Yes ☒ No

CITY AND COUNTY OF SAN FR[illegible]IS — D[illegible]RTMENT OF SOCIAL SERVICES

RECEIVED

AUG 2 8 1990

FRED REFERRAL

Referral Date 8-27-90

Section I: To be completed by line staff

Type of Referral:

FRED

☒ AFDC ☐ PAFS ☐ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

Case Name _____ Case Number _____ Client's SS#

(Payee, if different) _____ Ethnicity C Primary Language Chines

Address & Apt # [redacted], San Francisco, Ca 94110 ZIP 94110

List all persons living in the home

Client's Home Phone [redacted] Work Phone _____ Message Phone _____

EW's Name A. Hom Wkr. # K413 Phone # 557 5745

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements.

Clt's dau's daughter + granddaughter stay with her. Granddaughter added & deleted because no social security # & refused to reapply. DA's office requ granddaughter visits letter. Now clt claims daughter [illegible] clt wants to take back determine whether granddaughter [illegible] her mother. Would like home visit [illegible] stay with clt.

EW Signature _____ EW Supervisor Signature Rita Robinson

Section II: To be completed by FRED staff

Date Case Received @ 10:35 a.m. Assigned to 8228, Wong on 8/28/90 @ 10

Referral criteria #'s met: _____

Field Findings: Client stated that her daughter and granddaughter do not reside with her.

Results of Field Findings: Client is ineligible to AFDC. Please discontinue case

HV Made ☒ Yes ☐ No Date HV Made 8-30-90 Date Investigation Completed 9-4-90

HRS. Worked 2 Collateral Contacts Made? ☐ Yes ☒ No If YES, enter names of persons contacted _____

Complaint form given? ☒ Y ☐ N Complaint file ☐ Y ☒ N SIU Referral made ☐ Y ☒

Consent form on file ☐ Yes ☒ No Service referral made ☐ Yes ☒ No

Section III: To be completed by line staff and returned to FRED Unit.

CITY AND COUNTY OF SAN FRA .SCO — DEPARTMENT OF SOCIAL SERVICES

FRED REFERRAL

Referral Date 8/17/90

RECEIVED AUG 20 1990 FRED

Section I: To be completed by line staff

Type of Referral:

☒ AFDC ☐ PAFS ☐ AFDC HOMELESS ☐ GA ☐ NAFS ☐ MEDI-CAL

Case Name [redacted] Case Number [redacted] Client's SS#

(Payee, if different) _____ Primary Language English

(Homeless) Address & Apt # Casa Loma HOTEL Ilmore ZIP _____

List all persons living in the home

Client's Home Phone _____ Work Phone _____ Message Phone _____

EW's Name M. Barreto Wkr. # M433 Phone # [redacted] 5457

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts. Children never seen

Client is applying for [redacted] 4 Homeless. ... acting Medic in O Sacramento

[redacted] Sacramento, Ca 75821 — Suspicions were reported

EW Signature M Barreto EW Supervisor Signature [redacted]

Section II: To be completed by FRED staff

Date Case Received AUG 20 1990 Assigned to B221 Calloway on AUG 20 1990

Field Findings: H.V. TO [redacted] C/ WAS THERE WITH 2 CHILDREN. C/ STATED THAT THE FATHER OF THE CHILDREN WOULD ALLOW THEM TO STAY W/HER IF SHE FOUND PERM HOUSING. HOTEL MNGER STATED THAT [redacted] CHECKED IN WITH A MR [redacted] AND NO CHILDREN WERE SEEN. IC TO [redacted] (CHILDRENS FATHER) MR [redacted] WAS SURPRISED & ANGRY UPON HEARING THAT MS [redacted] HAD APPLIED FOR AID FOR THE boys BECAUSE HE HAS HAD CUSTODY of both CHILDREN FOR THE LAST-OVER

Recommendation: DENY AID & COLLECT OVERPAYMENT (HOMELESS ASSIST).

HV Made ☑ Yes ☐ No Date HV Made 8/24/90 Date Investigation Completed 8/24/90

HRS. Worked 1 1/2 Collateral Contacts Made? ☑ Yes ☐ No If YES, enter names of persons contacted [redacted]

Complaint form given? ☒ Yes ☐ No SIU referral made ☑ Yes ☐ No

Section III: To be completed by line staff and returned to FRED Unit.

STATISTICS AND DISPOSITION

CITY AND COUNTY OF SAN FRANCISCO — DEPARTMENT OF SOCIAL SERVICES

RECEIVED
AUG 13 1990

FRED REFERRAL

Referral Date Aug. 13, 1990

Section I: To be completed by line staff

Type of Referral: FRED

☒ AFDC ☐ PAFS ☐ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

Case Name [redacted] Case Number [redacted] Client's SS# [redacted]

(Payee, if different) _____ Ethnicity B Primary Language E

Address & Apt # [redacted] ZIP 94112

List all persons living in the home [redacted]

Client's Home Phone [redacted] Work Phone _____ Message Phone _____

EW's Name AL PABLO Wkr. # M2660 Phone # 557-5521

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements.

Client might be living with the A/F. Please see attached note. (#11)

(#11)

EW Signature Al Pablo EW Supervisor Signature [redacted]

Section II: To be completed by FRED staff

Date Case Received AUG 13 1990 Assigned to B226 - K. Snyder on AUG 13 1990

Referral criteria #'s met: _____

Field Findings: HV on 9-5-90 & 9-7-90 - clt not at home either time. called me on 9-7-90 and rescheduled her appt for 9-10-90. HV made on 9-10-90. and her 3 younger children were asleep when I arrived. Belongings and sleeping arrangements were seen. The last 3 children were fathered by [redacted] Mrs. [redacted] confirmed clt and her children live w/ her.

Results of Field Findings: AFDC should be continued. Clt appears to live at [redacted] w/ her children & her aunt

9-5-90 K. Snyder B226

HV Made ☒ Yes ☐ No Date HV Made 9-7-90 9-10-90 Date Investigation Completed 9-10-90

HRS. Worked 2½ Collateral Contacts Made? ☐ Yes ☐ No If YES [redacted] names of persons contacted

Complaint form ~~given~~ mailed? ☒ Y ☐ N Complaint file ☐ Y ☒ N SIU Referral made ☐ Y ☒ N

Consent form on file ☒ Yes ☐ No Service referral made ☐ Yes ☒ No

CITY AND COUNTY OF SAN FRANCI[illegible] ARTMENT OF SOCIAL SERVICES

RECEIVED
AUG 27 1990

FRED REFERRAL

Referral Date 8/27/90

Section I: To be completed by line staff

Type of Referral: Fax

☐ AFDC ☐ PAFS ☑ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

Case Name [redacted] Case Number [redacted] Client's SS# [redacted]

(Payee, if different) _____ Ethnicity _____ Primary Language Engl

Address & Apt # _____ ZIP _____

List all persons living in the home 3 (7 yr. old)

Client's Home Phone _____ Work Phone _____ Message Phone _____

EW's Name C Bankston Wkr. # 1357 Phone # 557-5354

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements. Second year request for H.A.
First year request was - 8/25/89.
Client moved out voluntarily - because she is no longer comfortable living with landlord. She is afraid to stay in present since she was attacked by 2 guys early morning of Aug

EW Signature C Bankston EW Supervisor Signature [illegible]

Section II: To be completed by FRED staff

Date Case Received @ 4:05 p.m. Assigned to Barb. Snyder on 8/27/90 @ 4

Referral criteria #'s met: _____

Field Findings: HV made on 8/30/90 to [redacted] St. Client left her old address because she was too frightened to stay there. She had been attacked then threatened by 2 men who kept telling her "we know where you & your kid live." Clt. was also threatened about contacting the Police. Ms. I [redacted] was still quite [illegible]

Results of Field Findings: E ~~Appr~~ Approve Homeless Assis. Clt seems to have left her last address w/ Good Cause.

HV Made ☒ Yes ☐ No Date HV Made 8-30-90 Date Investigation Completed 9-5-9

HRS. Worked _____ Collateral Contacts Made? ☒ Yes ☐ No If YES, enter names of persons contacted _ Client at EC

Complaint form given? ☒ Y ☐ N Complaint file ☐ Y ☐ N SIU Referral made ☐ Y ☒ N

Consent form on file ☒ Yes ☐ No Service referral made ☐ Yes ☒ No

CITY AND COUNTY OF SAN FRANCISCO — DEPARTMENT OF SOCIAL SERVICES

RECEIVED
AUG 8 1990

FRED REFERRAL

Referral Date 8-8-90

Type of Referral: FRED

Section I: To be completed by line staff

☐ AFDC ☐ PAFS ☑ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NA

Case Name _____ Case Number _____ Client's SS# _____

(Payee, if different) Old address: [redacted] Ethnicity S Primary Language E

Address & Apt # [redacted] SF 94110 ZIP 94110

List all persons living in the home [redacted]

Client's Home Phone _____ Work Phone 0 Message Phone _____

EW's Name William Neville Wkr. # M235 Phone # 5295

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements.

Computer will not give info on
can't verify owner - not phone numbers for
Who is supposedly the owner!!

EW Signature William Neville EW Supervisor Signature _____

Section II: To be completed by FRED staff

Date Case Received @ 11:16 a.m. Assigned to Gaal, Ph on 8/8/90 @

Referral criteria #'s met: _____

Field Findings: HV at [redacted] Clt. was not there. A Mr. [redacted] stated that Clt. has not moved in yet. He verified that [redacted] is the owner and that Clt.'s rent will be $445 per month. Clt needs to pay 1st mos. and last mos. rent plus security deposit of $200.

Results of Field Findings: Permanent housing assistance should be issued to [redacted]

HV Made ☑ Yes ☐ No Date HV Made 8/9/90 Date Investigation Completed 8/9/

HRS. Worked _____ Collateral Contacts Made? ☑ Yes ☐ No If YES, enter na
of persons contacted

Complaint form given? ☑ Y ☐ N Complaint file ☐ Y ☑ N SIU Referral made ☐ Y

Consent form on file ☑ Yes ☐ No Service referral made ☐ Yes ☑ No

...ND COUNTY OF SAN FRA... ...O — ...PARTMENT OF SOCIAL SERVICES

RECEIVED

AUG 23 1990

FRED REFERRAL

Referral Date 8/22/90

Section I: To be completed by line staff

Type of Referral:

FRED

☑ AFDC ☐ PAFS ☐ AFDC HOMELESS ☐ GA ☐ NAPS ☐ MEDI-CAL

Case Name [redacted] Case Number [redacted] Client's SS# [redacted]

(Payee, if different) _____ Primary Language _____

Address & Apt # [redacted] SF CA ZIP 94115

List all persons living in the home [redacted] (cousin)

Client's Home Phone [redacted] Work Phone — Message Phone —

EW's Name Betty Eng Wkr. # M459 Phone # 557-6317

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts.

17yrs old applicant is receiving AFDC with his Mother in Sacramento. He is staying with his cousin in SF with 1½ Months baby. Need to verify the baby is with them & his current living arrangement. This AFDC will be ICT to S.F.

EW Signature Betty Eng EW Supervisor Signature [signature]

Section II: To be completed by FRED staff

Date Case Received 8/23/90 @ 11:00 a.m. Assigned to [redacted] on 8/23/90 @ 11

Field Findings: H/V made on 8/28/90. [redacted] was not at home. I called [redacted] when I returned to 170 Otis, SF and left a message for [redacted] to call me. Another H/V mad on 8-29-90. No response. I again called [redacted] & was told" [redacted] don't live here." The male voice refused to identify himself. I asked to leave a message & was told "If I ever see him." K. Snyder B226

Recommendation: Deny- clt not at above address. Whereabouts UNK.

HV Made ☒ Yes ☐ No Date HV Made 8/28/90 8/29/90 Date Investigation Completed 8/29/90

HRS. Worked 2½ Collateral Contacts Made? ☒ Yes ☐ No If YES, enter names of persons contacted unidentified male at [redacted]

Complaint form ~~given~~ mailed? ☒ Yes ☐ No SIU referral made ☐ Yes ☒ No

Section III: To be completed by line staff and returned to FRED Unit.

CITY AND COUNTY OF SAN FRANCISCO
RECEIVED
AUG 30 1990

DEPARTMENT OF SOCIAL SERVICES

FRED REFERRAL

Referral Date 8-30-90

FRED Section I: To be completed by line staff

Type of Referral:

☐ AFDC ☐ PAFS ☑ AFDC HOMELESS ☐ GA ☐ NAFS ☐ MEDI-CAL

Case Name _____ Case Number _____ Client's SS# _____

(Payee, if different) _____ Primary Language English

Address & Apt # _____ ZIP 94124

List all persons living in the home _____

Client's Home Phone none Work Phone none Message Phone none

EW's Name Alfred Silmon Wkr. # M326 Phone # 5320

Reason For Referral. State specific reasons as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and Statement of Facts.

Clnt says building where she was living was torn down due to earthquake damage.

EW Signature Alfred Silmon EW Supervisor Signature A. Pajo

Section II: To be completed by FRED staff

Date Case Received 8/30/90 @ 1:20 P.M. Assigned to Bode, Gregory on 8/30/90

Field Findings: has applied for perm. Hou but clt can't verify she has ever been homel (see 092 dated 8-21-90). ms. claimed she ag moved to -but never told new worker or chan her address has not been torn dow There was no response at that address, but the do is occupied. K. Snyder B226

Recommendation: Deny - MS. can't verify he homelessness & her whereabouts as unk at this ti

HV Made ☒ Yes ☐ No Date HV Made 8-31-90 Date Investigation Completed 8-

HRS. Worked 2 Collateral Contacts Made? ☐ Yes ☒ No If YES, enter

of persons contacted _____

Complaint form given? ☒ Yes ☐ No SIU referral made ☐ Yes ☒ N

AND COUNTY OF SAN FR[redacted]IS

[redacted]RTMENT OF SOCIAL SERVICES

RECEIVED

AUG 2 [illegible]

FRED REFERRAL

Referral Date 8-27-90

Section I: To be completed by line staff

e of Referral: FRED

AFDC ☐ PAFS ☐ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

e Name _____ Case Number _____ Client's SS#

yee, if different) _____ Ethnicity C Primary Language Chinese

ress & Apt # [redacted], San Francisco, Ca 94110 ZIP 94110

t all persons living in the home

ient's Home Phone [redacted] Work Phone _____ Message Phone _____

s Name A. Hom Wkr. # K413 Phone # 557-5745

eason For Referral. State specific reasons for referral as outlined in Program Memo filed FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 4s, and/or Statement of Facts and state some steps the client or the department has en to assist in meeting eligibility requirements.

Clt claims daughter + granddaughter staying with her. Granddaughter added at clt's request. DA's office reports deleted because no social security # & refused to respond. SS# 35 granddaughter with letter. Now clt claims daughter has moved. Would like home visit to clt's home to determine whether granddaughter is staying with clt.

EW Signature [redacted] EW Supervisor Signature Rita Robinson

Section II: To be completed by FRED staff

ate Case Received @ 10:35 a.m. Assigned to B228, Wong on 8/28/90 @ 10:50

Referral criteria #'s met: _____

Field Findings: Client stated that her daughter and granddaughter do not reside with her.

esults of Field Findings: Client is ineligible to AFDC. Please discontinue case.

V Made ☒ Yes ☐ No Date HV Made 8-30-90 Date Investigation Completed 9-4-90

RS. Worked 2 Collateral Contacts Made? ☐ Yes ☒ No If YES, enter names f persons contacted _____

omplaint form given? ☒ Y ☐ N Complaint file ☐ Y ☒ N SIU Referral made ☐ Y ☒ N

onsent form on file ☐ Yes ☒ No Service referral made ☐ Yes ☒ No

Section III: To be completed by line staff and returned to FRED Unit.

CITY AND COUNTY OF SAN FR[illegible]SCO — DEPARTMENT OF SOCIAL SERVICE

FRED REFERRAL

Referral Date Aug. 15, 199

Section I: To be completed by line staff

Type of Referral:

☑ AFDC ☐ PAFS ☑ AFDC HOMELESS o Temporary o Permanent ☐ GA ☐ NAFS

Case Name [illegible] Case Number [illegible] Client's SS# [illegible]

(Payee, if different) [illegible] Ethnicity B Primary Language Engl

Address & Apt # [illegible] ZIP 94607

List all persons living in the home [illegible]

Client's Home Phone [illegible] Work Phone [illegible] Message Phone [illegible]

EW's Name Carmen A. Palarca Wkr. # M323 a Phone # 5325

Reason For Referral. State specific reasons for referral as outlined in Program Memo titled FRED: Criteria For Referral. Attach any pertinent information, e.g., picture ID. 8014s, and/or Statement of Facts and state some steps the client or the department has taken to assist in meeting eligibility requirements.

Clt's oldest child is NOT with her at this time, pd rent for 2 people is $448.00, for rent - $550.00. EW wants to fax dcl if oldest child is still staying w/ clt. in order to ok or deny permanent housing. #14

EW Signature CAPalarca EW Supervisor Signature John Letts

Section II: To be completed by FRED staff

Date ~~Case~~ Received RECEIVED Assigned to [illegible] on [illegible]

Referral Criteria #'s met: 4

Field AUG 15 1990 TC TO [illegible] NOTEL IN OAK CA. CLIENT & 1 OTHER ADULT CHECKED IN AT 12:00 MIDNIGHT ON 8/1/90. T.C. MADE TO BIG BEAR CAMP. ACCORD TO CAMP RECORDS, [illegible] BAPTIST CHURCH HAS NOT HELD CAMP THERE SINCE LA WINTER. TC. MADE TO [illegible] CLIENTS FATHER. STATED THAT [illegible] LIVED WITH HIM & HE DIDNT KNOW WHEN SHE [illegible] be RETURNED TO [illegible] CLIENT CALLED 8/20 TO REPORT THAT SHE HAS MOVED TO [illegible]

Results of Field Findings: DENY H/A AMOUNT of RENT EXCEEDS LIMIT FOR NEEDS FOR 2 PEOPLE: 6 SHE DOES NOT LIVE WITH H.

TRANSFER CASE - Clients NEW ADDRESS -

HV Made ☐ Yes ☑ No Date HV Made [illegible] Date Investigation Completed 8/17/90

HRS. Worked 3HR Collateral Contacts Made? ☑ Yes ☐ No If YES, enter names of persons contacted [illegible]

Complaint form given? ☑ Y ☐ N Complaint file ☐ Y ☐ N SIU Referral made ☐ Y ☑

Consent form on file ☑ Yes ☐ No Service referral made ☐ Yes ☐ No

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CITY AND COUNTY OF SAN FRANCISCO
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FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the November 7, 1990 Meeting

The 21st meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, November 7, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT

Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Rita R. Semel, United Way - Subcommittee on Homelessness
Julia Velson, Homeless Advocacy Project
Virginia Leyva, SF Neighborhood Legal Assistance
Sandy Weiner, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

FRED QUARTERLY REPORT TO SAN FRANCISCO BOARD OF SUPERVISORS' FINANCE COMMITTEE

Michael Hancock reported the Finance Committee was considering the FRED Quarterly Report today at 2 p.m.

The FRED Quarterly Report was discussed including concerns regarding:

1. Homeless Assistance clients who have not received copies of their referral and complaint forms.

   Ms. Weiner agreed to furnish DSS with specific information by 11/9/90. DSS will determine where the breakdown occurred and take corrective action as necessary.

2. Lengthy response time to recinded and conditionally withdrawn FRED cases.

   Mr. Galvan offered to interced and advocate for a shortened period of response.

3. Care and control tests used to determine parental rights to AFDC.

   Mr. Galvan explained this determination is made on a case by case basis. DSS requires substantial evidence of provision for the child's needs. When necessary, the FRED social worker is employed in the determination.

4. Procedure used prior to referring for "unable to locate".

   Mr. Galvan commented that referrals are made after three attempts to verify client's location.

NEXT MEETING

By general consent, the FCAC agreed to meet again on Wednesday, December 19, 1990, at 10 a.m. 170 Otis Street, 8th floor conference room.

AGENDA

1. discussion re referrals made because DSS is unable to locate
2. consideration of computer research dealing with reapplications
3. consideration of process for the dissemination of information

Louise Rainey

Louise Rainey, Commission Secretary
Social Services Commission

5.212
12/19/90

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FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the December 19, 1990 Meeting

The 22nd meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, December 19, 1990 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT	Michael Hancock, Coordinator, DSS FRED Program Juan Galvan, Eligibility Worker Supervisor, FRED Program Louise Rainey, Secretary, Social Services Commission
EXCUSED ABSENCES	Julia Velson, Homeless Advocacy Project Sandy Weiner, Income Rights Project
NEXT MEETING	By general consent, the next meeting was set for Wednesday, January 16, 1991 at 10 a.m. 170 Otis Street, 8th floor conference room.
ADJOURN	The meeting was adjourned at 10:15 a.m. for lack of participants.

Louise Rainey

Louise Rainey, Commission Secretary
Social Services Commission

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Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

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FRED COMMUNITY ADVISORY COMMITTEE

Minutes of the January 16, 1991 Meeting

The 23rd meeting of the FRED Community Advisory Committee (FCAC) was held on Wednesday, January 16, 1991 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT — Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Laura Ware, Community Housing Partnership
Cecilia Esguerra, Income Rights Project
Sandy Weiner, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

EXCUSED — Rita Semel, United Way Sub-Committee on Homelessness

DISCUSSION — Juan Galvan distributed FRED Data/Stats for October 1990, and a random sampling of FRED referral forms.

Mr. Galvan reported that FRED Training for Eligibility Workers is being scheduled for the end of February 1991.

Discussion followed. Concerns were expressed re Eligiblity Workers' lack of training.

Juan Galvan stated that he will ask the Assistant Directors to remind staff to complete FRED referral forms accurately.

Sandy Weiner presented a list of clients who allege they were inappropriately referred to the FRED Program.

NEXT MEETING — Michael Hancock suggested and it was agreed to by general consent, to meet again next Wednesday, January 23rd at 10:30 a.m., 170 Otis Street, 8th floor conference room.

AGENDA

1. Consideration of memo reminding staff of the criteria for referral to the FRED Program and outlining steps for referral
2. Report of actions re complaints
3. Report re status of training

ADJOURN — There being no further business, Michael Hancock adjourned the meeting at 11:15 a.m.

Louise Rainey

Louise Rainey, Secretary
Social Services Commission

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CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the January 30, 1991 Meeting

The FRED Community Advisory Committee (FCAC) held a meeting on Wednesday, January 31, 1991 at 10 a.m., 170 Otis Street, 8th floor conference room.

PRESENT — Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Robert Capistrano, SF Neighborhood Legal Assistance
Judy Blochowiak, Tenderloin Self Help Center
Rita Semel, United Way - Subcommittee on Homelessness
Cecelia Esguerra, Income Rights Project
Louise Rainey, Secretary, Social Services Commission

MATERIALS DISTRIBUTED — The following was distributed to those assembled: (1) 11/28/90 Memorandum to the Finance Committee RE Questions re the FRED Program; (2) Random sampling of FRED referrals; (3) Nov 90 Statistics.

FEB 19, 1991 REFRESHER TRAINING COURSE — Juan Galvan reported that starting February 19th staff will be offered a FRED Refresher Training that is designed to review the procedure and criteria involved re FRED.

NEXT MEETING — By general consent, it was agreed to meet again on Wednesday, March 27, 1991, 10 a.m., 170 Otis Street, 8th floor conference room.

AGENDA
1. answer as to why Food Stamp workers do not include their worker i.d. number on referral forms
2. review of data and referral form random sampling.

ADJOURN — There being no further business, Michael Hancock adjourned the meeting at 11:20 a.m.

Louise Rainey, Secretary
Social Services Commission

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27/91

CITY AND COUNTY OF SAN FRANCISCO
Department of Social Services
P. O. Box 7988, San Francisco, CA 94120

FRED COMMUNITY ADVISORY COMMITTEE
Minutes of the March 27, 1991 Meeting

The FRED Community Advisory Committee (FCAC) held a meeting on Wednesday, March 27, 1991 at 10 a.m., 170 Otis Street, 8th Floor conference room.

PRESENT
Michael Hancock, Coordinator, DSS FRED Program
Juan Galvan, Eligibility Worker Supervisor, FRED Program
Julia Velson, Homeless Advocacy Project
Cecilia Esguerra, Income Rights Project
Sandy Weiner, Income Rights Project
Virginia Leyva, SF Neighborhood Legal Assistance
Josh Brandon, Homeless Task Force
Louise Rainey, Secretary, Social Services Commission

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MATERIALS DISTRIBUTED
The December 1990 and January 1991 FRED Data/Stats were distributed to those present.

CONCERNS
Discussion followed including the following concerns re the FRED Program:
° FRED referral criteria not adhered to in referring clients to FRED
° FRED referral forms are not given to clients or are given late
° Client's authorized representatives are denied access to files
° FRED data/stats are not furnished in a timely manner
° Client's complaints are not followed up

STAFF RESPONSE
Juan Galvan stated in response to the concerns:
* FRED Training re implementation of referral criteria and procedures was held in late February
* Work load prohibits a more timely delivery of stats/data at this time
* Client's authorized representatives have free access to files. Bring specifics to the program's attention.
* Client is responsible for maintaining contact with the program after filing a complaint/allegation of FRED Program misconduct.

OUTCOME
Sandy Weiner stated that the advocates had met and agreed that FCAC meetings were not leading anywhere. The advocate community believe the time has come to dispense with the FCAC and meet directly with Commission President Chow and General Manager Lopez. Ms. Weiner further stated that they will initiate the meeting within the next two weeks.

ISSUES
Ms. Weiner commented that the agenda for the meeting with Ms. Chow and Ms. Lopez will include:
1. Bringing DSS into compliance with the agreed upon FRED referral criteria.
2. Bringing DSS into compliance with the agreed upon FRED referral procedures.
3. Budgetary rational re continuing the FRED program in light of the City's budget deficit.

CONCLUSION
Michael Hancock assured the FRED program continues to solicite the community's input as it strives to refine the program. Mr. Hancock asked that specific information be provided the department re alleged programatic transgressions so they may be corrected.

ADJOURN There being no further business, Mr. Hancock adjourned the meeting at 10:45 a.m.

Louise Rainey, Secretary
Social Services Commission